PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. POPE IS ~APPLICATION FLORIDA DEPARTMENT OF STATE Jim Smith **FOR** Secretary of State > REINSTATEMENT PIVISION OF CORPORATIONS FILED DOCUMENT # 02 DEC 13 PM 2: 34 1. Corporation Name SAX MUSIC CORPORATION Principal Place of Business Mailing Address **CD WAREHOUSE** 960 NORTHLAKE BOULEVARD 96C, NORTHLAKE BLVD LAKE PARK FL 33403 LAKE PARK FL 33403 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 04/15/1994 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For 65:048.13.17 City & State City & State Not Applicable \$8.75 Additional Fee required Zip Country Country CERTIFICATE OF STATUS DESIRED for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) City / State / Zip and/or Directors Officer and/or Director LAKE PARK FL VΡ SAX, BONNIE L OGO NORTH LAKE BLVD PALM BCH GON'S FL 33418 5270 DESERT VIXEN RO LAKE PARK PL F. 960 NORTH LAKE BLVD SAX, DAVID A 5270 DESERT VIXEN RIS 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent SAX, DAVID A Street Address (P.O. Box Number is Not Acceptable) 960 NORTHLAKE BOULEVARD LAKE PARK FL 33403. State 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S. Signature of Registered Ag REGISTERED AGENT MUST SIGN 11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. 10/22/02 521 3275

Zip





Reference Number: P94000028952

Tuesday, November 26, 2002

Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

I am writing to you in regards to the reinstatement status of my company SAX MUSIC CORPORATION. I submitted the attached letter of explanation to the State on October 12, 2002. As I explained, I do not recall receiving any notification for filing of this document for either Florida corporation for which I am responsible - SAX MUSIC CORPORATION or DISC MAGIC CORPORATION. Once I received notification to file, I immediately submitted the \$150 fee for each individual corporation.

Recently, I received a letter stating that I owe \$600 for SAX MUSIC CORPORATION. I called the State (11/26/2002 2:30 PM) to check the status of DISC MAGIC CORPORATION; the letter and check were accepted with no additional fees. The individual I spoke with was very pleasant and strongly suggested that I submit another letter to the State requesting the SAX MUSIC CORPORATION situation be handled like it was for DISC MAGIC CORPORATION. Therefore, I am requesting that the additional fee be waived. I have owned SAX MUSIC CORPORATION for more than eight years and have paid these fees always in a timely fashion.

Thank you for your consideration and understanding in this matter. If you need to contact me directly, please do so at 561-327-5049.

Thank you once again...

Regards.

David A. Sax - The state of the Owner, Sax Music Corporation