

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000071027

FILED
Jun 24, 2005
Secretary of State

Entity Name: HOLLYWOOD SCHOOL OF NEON, INC.

Current Principal Place of Business:

521 S 21ST AVE
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

521 S 21ST AVE
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 65-0548162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LECLAIRE, JOHN
1906 ROOSEVELT ST
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN LE CLAIRE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LE CLAIRE, JOHN
Address: 1906 ROOSEVELT ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: LE CLAIRE, ANNE
Address: 1946 ROOSEVELT ST
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNE LE CLAIRE

D

06/24/2005

Electronic Signature of Signing Officer or Director

Date