

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
00 MAR -6 AM 8:04

DOCUMENT # 94600087889

1. Corporation Name

Infotainment USA, Inc.

W00-3293

Principal Place of Business

Mailing Address

328 Lake Avenue, Suite 216B
Maitland, FL 32751-6387

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

98-10

4. Date Incorporated or Qualified
To Do Business in Florida

8-1-96

5. FEI Number

65-0553016

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P, T S, V, D	Mark E. Ward	328 Lake Avenue, Suite 216B	Maitland, FL 32751- 6387

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-03/10/00-01007-008
***1058.75 ***1058.75

Phyllis

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Lynn Iozia
7380 Sand Lake Rd., Ste. 564
Orlando, FL 32819

Name

Mark E. Ward

Street Address (P.O. Box Number is Not Acceptable)

328 Lake Ave., Ste. 216B

Suite, Apt. #, Etc.

City

Maitland

State

FL

Zip Code

32751-6387

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.

Signature of
Registered Agent

[Signature]
REGISTERED AGENT MUST SIGN

Date 18 JAN 2000
RESUBMITTED 1 MARCH 2000 NW

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK E. WARD (PRESIDENT)

Date

407 975-6569

Daytime Phone #

CR2E081 (12/96)