

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

pg 1 of 2

APPLICATION

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

FILED

97 JAN 27 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000089519

1. Corporation Name

JDR ENTERTAINMENT, INC.

Principal Place of Business

3020 W. NEW HAVEN AVE.
WEST MELBOURNE, FL.
32904

Mailing Address

3020 W. NEW HAVEN AVE.
WEST MELBOURNE, FL.
32904

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1/1/95

5. FEI Number

59-3284932

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
PSD	JERRY D. ROBERTS	3020 W. NEW HAVEN AVE.	WEST MELBOURNE, FL. 32904
VT	RICHARD RICKEY	116 FLUG AVE.	INDIALANTIC, FL. 32903
			800002073698--1 -01/30/97--01052--002 ****233.75 ****233.75
			JBI-28-97

8. Name and Address of Current Registered Agent

JERRY D. ROBERTS
3020 W. NEW HAVEN AVE.
WEST MELBOURNE, FL. 32904

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Jerry D. Roberts

REGISTERED AGENT MUST SIGN

Date 1-8-97

11. Does this corporation pay any intangible tax to the

Dept. of Revenue under S. 199.032, Florida Statutes. 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.

RICHARD RICKEY

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Rickey

Date

(407) 727-7819

Daytime Phone #

CR2040 (7/96)

Dear Trevor

1-21-97

I am sending you this check for \$233.75 as per our conversation as to the fact that I never received the proper forms or paperwork to reinstate our corporation.

As a reminder, you recently received paperwork from us but said the money order was not attached. We have a tracer + stop payment on that money.

If you have any questions, please feel free to call.

Thank You,
Richard Ricky