

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 98000023693

1. Corporation Name

ARTSPACE PRODUCTIONS INC.

Principal Place of Business

Mailing Address

3374-6 So. McCall Rd.  
ENGLEWOOD, FL. 34224

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

4. Date Incorporated or Qualified  
To Do Business in Florida

MARCH 23 1995

5. FEI Number

65-0578611

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
PRES	CURTIS L. WELTER	11972 HELICON AVE	PT. CHARLOTTE, FL. 33981
SEC	PAULA E. WELTER	11972 HELICON AVE	PT. CHARLOTTE, FL. 33981
TRKS	CONNIE E LEHNING	10451 KIDRON AVE ARTB	ENGLEWOOD, FL 34224

REINSTATEMENT

100002520821--5

-05/12/98--01087--007

\*\*\*1050.00 \*\*\*1050.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

NOT SURE WHO WAS LAST  
OFFICIALLY LISTED AS REG. AGENT.

Name

CURTIS L. WELTER

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

11972 HELICON AVE

Suite, Apt. #, Etc.

City

PT. CHARLOTTE

State

FL

Zip Code

33981

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

REGISTERED AGENT MUST SIGN

Date APRIL 27, 1998

11. This corporation owes or has paid 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:

CURTIS L. WELTER

APRIL 29, 1998

Date

Daytime Phone #

941 472 8512