

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

96 DEC 11 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

000002027840--4  
-12/12/96--01097--002  
\*\*\*375.00 \*\*\*375.00

DOCUMENT # **PA5000025758**  
1 Corporation Name  
**D & J STUDIOS INC.**

Principal Place of Business Mailing Address  
**4630 S. KIRKMAN ROAD  
SUITE 285  
ORLANDO, FL 32811**

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable		3. New Mailing Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MARCH 31, 1995	
City & State		City & State		5. FEI Number	
Zip		Zip		59-3320232	
Country		Country		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$81.75 Additional Fee required for a Certificate of Status	
		ORANGE		Applied For	
				Not Applicable	

7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	DAWN M. DAVITT	6113 KIPPS COLONY DR. W.	GULFPORT, FL 33707

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DAWN M. DAVITT 6113 KIPPS COLONY DR. W. GULFPORT, FL 33707		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State Zip Code
		FL	

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 Dawn Davitt Date 12/5/96  
REGISTERED AGENT MUST SIGN

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Dawn Davitt Date 12/5/96  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR20040 (12/95)