

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 CORPORATIONS

00 OCT 19 PM 12:51

DOCUMENT # **P95000083416**

1. Corporation Name

D'FABULOUS PRODUCTIONS, INC.

Principal Place of Business

Mailing Address

3135 W BROWARD BLVD
FT LAUDERDALE FL 33311

3135 W BROWARD BLVD
FT LAUDERDALE FL 33311



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

4. Date Incorporated or Qualified
To Do Business in Florida

10/30/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

52-1745364

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 3	City / State / Zip 4
D	MATHIS, NADINE	3135 W BROWARD BLVD	FT LAUDERDALE FL 33311

~~700003446837--4~~
~~-11/01/00--01051--009~~
~~***150.00 ***150.00~~

Handwritten signature/initials

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MAFFEI, GEORGE P
633 SE THIRD AVE STE 4R
FT LAUDERDALE FL 33301

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

Handwritten signature of George P. Maffei
REGISTERED AGENT MUST SIGN

Date

10/16/00

11. 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:

Machine Mathis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/13/00

Daytime Phone #

CR2ED40 (8/00)

Whom, ever it may concern

Division of Corp.

My Corp. D' Fabulous Production Inc.
never receive the first annual report
filing paper

We had been calling and calling leaving
message after message asking about
the filing report paper

My Corp. just now receive the filing
paper

I sending hundred and fifty dollars.

D' Fabulous Production Inc.

52-1745364

Thank you