

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 OCT -2 PM 1:59

DOCUMENT # **P96 0000 14966**

1. Corporation Name

KMD Fine Arts Inc

2. Principal Office Address

17715 Boca Club Blvd. #101 So Ocean DR

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Hollywood FL

Zip

33487

Country

USA

Zip

33019

Country

USA

REINSTATEMENT 04-06

**4. Date Incorporated or Qualified
To Do Business in Florida**

1-1-97

5. FEI Number

05-0692408

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

KENNETH DUBLIN

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

#101 So Ocean DR

Suite, Apt. #, Etc.

1905

City

Hollywood

State

FL

Zip Code

33019

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

x Kenneth M. Dublin

Date

9/30/06

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Kenneth Dublin	#101 So Ocean DR #1905	Hollywood FL 33019
Secy	Eason Dublin	"	"
			200080688332 10/10/06--01060--005 **450.00

10. 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 contained in Chapter 119, 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:

x Kenneth M. Dublin Ken Dublin Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/30/06 (61)350-6354

Daytime Phone #

B. Mitchell OCT

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Sept 23, 2006

Florida Dept of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32311

Attn: Susan Carter

Ref # 896000014966

Dear Ms. Carter,

Please be advised that we never received the annual report notice or renewal for 2005 or thereafter.

We are filing herewith the corporation reinstatement & we respectfully request your approval.

Very truly yours
Ken Fire Arts Inc.
Ken Dublin
Ken Dublin, Pres