

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

97 DEC 29 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000032475

1. Corporation Name
US1 RECORDS, INC.

Principal Place of Business
**700 S ANDREWS AVE
SUITE 200
FT LAUDERDALE FL 33316**

Mailing Address
**700 S ANDREWS AVE
SUITE 200
FT LAUDERDALE FL 33316**



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

2. New Principal Office Address, If Applicable
1215 E. BROWARD BLVD.

Suite, Apt. #, etc.
SUITE 200

City & State
FT. LAUDERDALE, FL

Zip
33301

Country
USA

3. New Mailing Office Address, If Applicable
1215 E. Broward Blvd.

Suite, Apt. #, etc.
SUITE 200

City & State
FT. LAUDERDALE, FL

Zip
33301

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

04/08/1996

5. FEI Number

65-0715630

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ **REINSTATEMENT**

**\$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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	John Bradley	1215 E. Broward Blvd #200	FT. LAUDERDALE, FL 33301

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******758.75 ****758.75**

REINSTATEMENT 1997
U. Allen
12/29/97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**BRADLEY, JOHN F
700 S ANDREWS AVE
SUITE 200
FT LAUDERDALE FL 33316**

Name
John Bradley
Street Address (P.O. Box Number is Not Acceptable)
1215 E. Broward Blvd.
Suite, Apt. #, Etc.
#200
City
FT. LAUDERDALE

State
FL

Zip Code
33301

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

[Signature]

REGISTERED AGENT MUST SIGN

Date **11/20/97**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/20/97
Date

(954) 5236160
Daytime Phone #