

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 25 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000098472

1. Corporation Name

CASH APPEAL ENTERTAINMENT, INC.

Principal Place of Business

1046 MICHIGAN AVENUE
SUITE 12
MIAMI BEACH FL 33139
US

Mailing Address

1046 MICHIGAN AVENUE
SUITE 12
MIAMI BEACH FL 33139
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/05/1996

5. FEI Number

65-0713204

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 3	City / State / Zip 4
D	MCMAHON, R.W.	STE 4, 1355 MERIDIAN AVE. 1046 MICHIGAN AVE #12	MIAMI FL 33139
D	LACA, MANUEL JR.	12245 SW 71ST CT.	MIAMI FL 33156

600008581796

10/25/02--01008--022 **150.00

10/10/29

8. Name and Address of Current Registered Agent

MCMAHON, R W
1046 MICHIGAN AVENUE
SUITE 12
MIAMI BCH FL 33139

9. Name and Address of New Registered Agent

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. or 617.0505, F.S.

Signature of
Registered Agent

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/22/02

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:

Signature of Signing Officer or Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/22/02 305 672 4186

CR2E040 (8/02)

CASH APPEAL ENTERTAINMENT, INC.
1046 MICHIGAN AVENUE SUITE 12
MIAMI BEACH, FL 33139
305-606-5157

October 22, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Cash Appeal Entertainment, Inc. # P96000098472

Dear Sir or Madam:

As per our conversation with your office, please be advised that Cash Appeal Entertainment, Inc. never received their 2002 Uniform Business Report from the Florida Department of State or any other paperwork requesting or indicating the actions required to maintain our proper legal standing. We were therefore surprised upon receiving the Application for Reinstatement.

Enclosed please find our Application for Reinstatement and a check for \$150. We respectfully request the \$600 penalty be waived due to reasonable cause as stated above.

If you require any additional information please do not hesitate to contact us.

Sincerely,



R. W. McMahon
President