

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
94A2 Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 OCT 19 PM 2:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # P97000003065

1. Corporation Name

TEKNO TV, INC.

Principal Place of Business

1702 SOUTH DIXIE HIGHWAY  
LAKE WORTH FL 33460

Mailing Address

1702 SOUTH DIXIE HIGHWAY  
LAKE WORTH FL 33460

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

2. New Principal Office Address, If Applicable

1802 South Dixie Hwy  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business In Florida

01/06/1997

5. FEI Number

65-0732596

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	RIZK, ELIAS	1702 SOUTH DIXIE HIGHWAY	LAKE WORTH FL 33460

8. Name and Address of Current Registered Agent

RIZK, ELIAS  
1702 SOUTH DIXIE HIGHWAY  
LAKE WORTH FL 33460

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.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date 10/22/99

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/22/99

Daytime Phone #

FLORIDA DEPARTEMENT OF STATE  
ANNUAL REPORTS SECTION  
ATTN : TYRON SCOTT

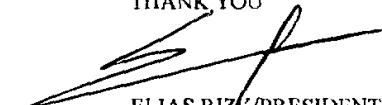
TEKNO TV AND STEREO  
1802 SOUTH DIXIE HWY  
LAKE WORTH, FL 33460  
REF# P97000003065

10/22/99

2

I, ELIAS RIZK PRESIDENT OF TEKNO TV, INC CALLED YOUR OFFICE ASKING ABOUT THE ANNUAL REPORT FORM THAT YOU HAVE USUALLY SEND TO ME EVERY YEAR TO FILE AND SINCE I DID NOT RECEIVE THE FORM FOR THIS YEAR I WAS TOLD TO REQUEST A BLANK FORM WHICH I DID AND THAN I FILED MY REPORT AND SENDEED IT WITH THE CHECK THAT YOU HAVE ALREADY CASHED, SO I WOULD ASK YOU TO WAVE THE PENALTY FEE AND TO REINSTATE MY CORPORATION AS I HAVE DONE WHAT I WAS TOLD. THIS WILL BE MY SECOND LETTER THE PREVIOUS ONE WAS SENT TO YOU ON 6/26/99.

THANK YOU



ELIAS RIZK/PRESIDENT