PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham

Special and Trate

DIVISION OF CORPORATIONS **FOR** P97000016887 DOCUMENT # 99 IMR - 8 MM 9: 35 1. Corporation Name SEGRAL OF STATE
TALLAHACTES, FLORIDA OCEAN ONE STUDIO INC. Principal Place of Business Mailing Address 1241 WASHINGTON AVE. 1241 WASHINGTON AVE. MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 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 Date Incorporated or Qualified To Do Business in Florida 02/18/1997 Suite, Apt. #, etc Suite, Apt. #, etc. 5 FEI Number Applied For City & State City & State Zip Country Zφ Country 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors Title(s) City / State / Zip PD MAWARDI, RALPH 1241 WASHINGTON AVE. MIAMI BEACH FL 33139 S MIAMI BEACH FL 33139 MAWARDI, RALPH 1241 WASHINGTON AVE. 0Φ0002806150--S -03/15/39--01114--021 ****150.00 -****150.00 000002806150--5 ₩**150.00 ****150.00 8. Name and Address of Current Registered Agent Name and Address of New Registered Agent MAWARDI, RALPH Street Address (P.O. Box Number is Not Acceptable) 1241 WASHINGTON AVE. Suite, Apt #, Etc MIAMI BEACH FL 33139 City State Zip Code int of the roove named corporation, am familiar with and accept the obligations of Section 607,0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. Yes L 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 OF PRINTED NAME OF SIGNING OFFICER OR DIF

OCEAN ONE STUDIO 1241 WASHINGTON AVENUE MIAMI BEACH, FLORIDA 33139

Secretary of State Division of Corporations PO Box 6327 Tallahassee, Florida 32314

Dear Sir or Madam:

I am writing to you in the hope that you will reinstate my corporation and forgive the large penalty which is due for the reinstatement. I believe I have a reasonable cause to ask you for this request.

Having opened the corporation in 1997 and moving here from New York, I was never aware of this annual Florida requirement regarding the renewal of the corporation. The agency which helped me with the articles of incorporation and the filing with the state, never told me that every year I should receive a renewal. I had several corporations in New York and I was not familiar with Florida laws. As you can see I never received the renewal for 1998 and never paid it.

Two days ago my new accountant told me that my corporation has been dissolved by the state. I never received anything in the mail regarding this and never knew about it. I have a store and a lease under this corporation name and I must keep it, but the fine for reinstating it is very harsh and will be very hard for me to pay it.

Thank you in advance for your cooperation and consideration.

Sincerely

Ralph Mawardi