

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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

FILED

98 NOV 23 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000104552

1. Corporation Name

J ROYCE PRODUCTIONS INC.

Principal Place of Business

Mailing Address

8190 CLEARY BLVD VILLA 1901
PLANTATION FL 33324

8190 CLEARY BLVD VILLA 1901
PLANTATION FL 33324

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

4. Date Incorporated or Qualified
To Do Business in Florida

12/11/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0805037

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	WARREN, JANA	8190 CLEARY BLVD VILLA 1901	PLANTATION FL 33324

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WARREN, JANA
8190 CLEARY BLVD VILLA 1901
PLANTATION FL 33324

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

11/18/98

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

Date

Daytime Phone #

(954)
11/18/98 473-8777



Eichler Bergsman & Co., LLP
Certified Public Accountants

404 Park Avenue South • New York, New York 10016
Tel 212-447-9001 Fax 212-447-9006

2

Philip A. Baumgarten
Gilbert Bergsman
Paul Eichler
Richard M. Plutzer
Michael E. Silverman

November 16, 1998

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 33214-6327

Re: J. Royce Productions
ID# 65-0805037

Dear Sir or Madam:

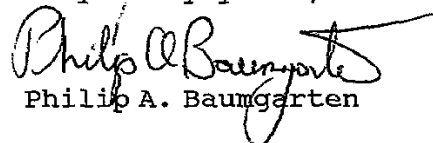
As accountants for the above referenced taxpayer we are enclosing a fully executed Application for Reinstatement.

Please note the taxpayer did not receive the annual report forms for 1998. As such the taxpayer could not timely file its annual report.

In view of the above we respectfully request that the late fees be waived. In this regard we enclose taxpayer's check for \$150.00.

Thank you for your attention to this matter. Should you need any additional information please contact the undersigned.

Very truly yours,


Philip A. Baumgarten