

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

AND
FILED

03 JUL -9 PM 5:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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08/04/03--01006--008 ***1200.00

REINSTATEMENT 00-03

**CORPORATION
REINSTATEMENT**

 **FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # P99000018286

1. Corporation Name

FREE LANCE ENTERTAINMENT GROUP, INC.

2. Principal Office Address

8737 WHITE IBIS COURT

Suite, Apt. #, etc.

City & State

ORLANDO FL

Zip

32836

Country

USA

3. Mailing Office Address

280 PARK AVE, 9TH FLOOR

Suite, Apt. #, etc.

5TH FLOOR EAST

City & State

NEW YORK NY

Zip

10017

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

02/24/1999

5. FEI Number

59-3629451

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$9.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

James L. Bass

Street Address (P.O. Box Number is Not Acceptable)

8737 WHITE IBIS COURT

Suite, Apt. #, Etc.

City

Orlando

State

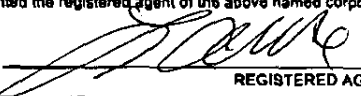
FL

Zip Code

32836

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent



REGISTERED AGENT MUST SIGN

Date

7-3-03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	James L. Bass	8737 WHITE IBIS COURT ORLANDO FL 32836	→
VP	Diane Bass	104 W. EASTHAVEN CIRCLE	BRANDON MS 39042
Sec.	Stacey Lofton	102 W. EASTHAVEN CIRCLE	BRANDON MS 39042
Treas.	James Bass	104 W. EASTHAVEN CIRCLE	BRANDON MS 39042

10. 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

7-3-03

Date

2129078000

Daytime Phone #

CR25001 (10-97)