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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000057478

1. Corporation Name

Blue Star Entertainment, Inc.

2. Principal Office Address

11110 West Oakland Park Blvd.

3. Mailing Office Address

11110 West Oakland Park Blvd.

Suite, Apt. #, etc.

339

Suite, Apt. #, etc.

339

City & State

Sunrise, Florida

City & State

Sunrise, Florida

Zip

33351

Country

USA

Zip

33351

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

6/24/99

5. FBI Number

20-1852222

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Howard Flamm

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

11110 West Oakland Park Blvd.

Suite, Apt. #, Etc.

339

City

Sunrise

State

FL

Zip Code

33351

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

Howard Flamm

Date

Nov. 8, 2004

REGISTERED AGENT MUST SIGN

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
P	Howard Flamm	11110 W. Oakland Park Blvd., # 339	Sunrise, FL 33351
V/S	Steven Chase	11110 W. Oakland Park Blvd., # 339	Sunrise, FL 33351

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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)(b), 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:

Howard Flamm

Howard Flamm, President

Nov. 8, 2004

1(800) 803-3456

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2012

BLUE STAR ENTERTAINMENT, INC.
11110 West Oakland Park Blvd.
339
Sunrise, FL 33351

November 4, 2004

Re: Reinstatement Fee Waiver
for Document Number: P99000057478

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Dear Reinstatement Division,

I, Howard Flamm, president of Blue Star Entertainment, Inc. am requesting a reinstatement of the corporation. In addition, I have not received a notice to file an annual report for Blue Star Entertainment, Inc. Thus, I am requesting a waiver or exemption from the reinstatement fee of \$600.00.

Thank you for your attention to this matter.

Sincerely,



Howard Flamm
President
Blue Star Entertainment, Inc.