

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 NOV 14 AM 10:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000062641

1. Corporation Name

DNS PRODUCTIONS, INC.

2. Principal Office Address

910 West Avenue

Suite, Apt. #, etc.

802

City & State

Miami Beach, FL

Zip

33139

Country

USA

3. Mailing Office Address

PO Box 398884

Suite, Apt. #, etc.

City & State

Miami Beach, FL

Zip

33239

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0934741

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Denise Serrano

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

910 West Avenue

Suite, Apt. #, Etc.

802

City

Miami Beach

State

FL

Zip Code

33139

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

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
President owner	Denise Serrano	PO Box 398884	Miami, FL 33139

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:

Denise Serrano

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/05/02 (786) 2769614

Daytime Phone #

CR2E081 (9/01)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

Ref. : DNS PRODUCTIONS, INC
P99000062641
EIN 650934741
Date : NOVEMBER 5TH, 2002

TO WHOM IT MAY CONCERN

Please find here enclosed check for \$150 for Business Report 2002, REINSTATEMENT, as per our telephone conversation and request from one of your agents, this form and report was never received at the present address.

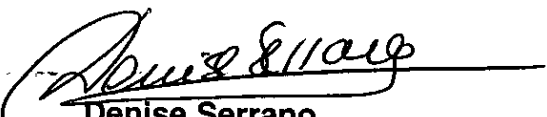
Please feel free to contact me anytime for any additional questions : 786-276-9614

PLEASE MAKE CHANGES OF ADDRESS TO:

PO BOX 398884
Miami Beach, Fl. 33239

Thanking you in advance for helping me solve this problem,

Sincerely



Denise Serrano
Owner / President