

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

00 DEC -8 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P49000063285**

1. Corporation Name

KEY PROMOTIONS, INC.

2. Principal Office Address

1451 W. Cypress Creek Rd.

3. Mailing Office Address

1451 W. Cypress Creek Rd

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 300

City & State

Fort Lauderdale, FL

City & State

Fort Lauderdale, FL

4. Date Incorporated or Qualified
To Do Business in Florida

07/09/99

5. FEI Number

65-0935264

Applied For

Not Applicable

Zip

33309

Country

U.S.A.

Zip

33309

Country

U.S.A.

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Maria DiSanto

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

1451 W. Cypress Creek Rd.

Suite, Apt. #, Etc.

Suite 300

City

Fort Lauderdale

State

FL

Zip Code

33309

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

Maria DiSanto

Date

12/4/00

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
D, P, S, T.	Maria DiSanto	1451 W. Cypress Creek Rd.	Fort Lauderdale, FL
		Suite 300	33309

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:

Maria DiSanto

Maria DiSanto

Date

12/4/00

Daytime Phone #

(954) 958-0318