

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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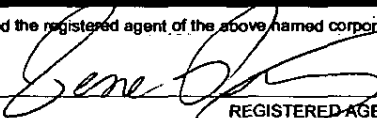
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 07-03

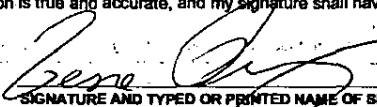
CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P99000083965			
1. Corporation Name Power Bomb Entertainment Incorporated			
2. Principal Office Address 11929 E Colonial DR Suite, Apt. #, etc. PMB 145 City & State Orlando, Florida Zip 32826 Country USA		3. Mailing Office Address 11929 E Colonial DR Suite, Apt. #, etc. PMB 145 City & State Orlando, Florida Zip 32826 Country USA	

4. Date Incorporated or Qualified To Do Business in Florida 09/20/1999	
5. FEI Number 59-359-9275	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 Jesse J. Perry Jr.	
Street Address (P.O. Box Number is Not Acceptable) 11929 E Colonial DR Suite, Apt. #, Etc. PMB 145 City Orlando State FL Zip Code 32826	

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 	Date 01/17/2003
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/V/T/S	Jesse J. Perry Jr.	11929 E Colonial DR, PMB 145	Orlando, FL 32826

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 Jesse Perry
Date 01/17/2003	Daytime Phone # (407)482-5313

CR2E081 (10/02)

25.11.23