

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 2006 8:00 A.M.
Secretary of State

DOCUMENT # P99000086388

1. Corporation Name

E-Plus Entertainment Inc.

2. Principal Office Address
1332 Old Burnt Store Road

3. Mailing Office Address
1332 Old Burnt Store Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Cape Coral, FL

City & State
Cape Coral, FL

Zip
33993

Country
LEE

Zip
33993

Country
LEE

**4. Date Incorporated or Qualified
To Do Business in Florida** 29-Sept-99

5. FEI Number 650950687

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

David Sholl

Street Address (P.O. Box Number is Not Acceptable)
887 Homestead Drive North

Suite, Apt. #, Etc.

City
N. Fort Myers

State
FL

Zip Code
33917

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**

David Sholl

REGISTERED AGENT MUST SIGN

Date 27 Feb 06

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.	David Sholl	887 Homestead Drive North	North Fort Myers, FL, 33917
V.	Stephen Sholl	1332 Old Burnt Store Road	Cape Coral, FL, 33993
S.	Nancy Sholl	887 Homestead Drive North	North Fort Myers, FL, 33917

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 contained in Chapter 119, 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:

David Sholl

David Sholl

27 Feb 06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2 of 2



27-Feb-06

Florida Department of State, Division of Corporations

RE: Notice of Non-Receipt for E-Plus Entertainment Inc., FEI# 650950687

Please be advised, that due to health issues and the unforeseen closure of our Delray Beach office in 2001, we did not receive any annual report notices in 2001, or thereafter.

Therefore we are requesting the waiving of the \$600 reinstatement fee.

E-PLUS

Submitted;


David Sholl