PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 OCT 28 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S01368**

1. Corporation Name

DADDONA STUDIOS, INC.

Principal Place of Business	Mailing Address
2530 NW 16TH LN POMPANO BCH FL 33064	2530 NW 16TH LN POMPANO BCH FL 33064

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 03

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
1384 NW 7 Street	1384 NW 7 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Boca Raton, FL	City & State: Boca Raton, FL
Zip: 33486 Country: USA	Zip: 33486 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 09/21/1990

5. FEI Number: 65-0219268 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	DADDONA, DANIEL R.	1384 NW 7TH STREET	BOCA RATON FL

300024204433
10/28/03--01043--002 **150.00

8. Name and Address of Current Registered Agent

DADDONA, DANIEL R.
1384 NW 7 ST
BOCA RATON FL 33486

9. Name and Address of New Registered Agent

Name: Daniel R. Daddona
Street Address (P.O. Box Number is Not Acceptable): 1384 NW 7 ST
Suite, Apt. #, Etc.:
City: Boca Raton State: FL Zip Code: 33486

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent: X _____ Date: 10/27/03
REGISTERED AGENT MUST SIGN

11. 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: X _____ 10/27/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MARKROB ACCOUNTING SERVICE, INC.

PO BOX 771210
CORAL SPRINGS, FL. 33077-1210
954.346.7288-BROWARD 954.346.7217-FAX
954.434.5996-S.BROWARD 305.621.9382-DADE

10/27/03

Florida Dept of State
Annual Reports Filings
Division of Corporations
PO BOX 6327
Tallahassee, Fl. 32314

Re: Corporate Renewals
Daddona Studios, Inc.
S01368

To Whom It May Concern:

This is to request acceptance of the enclosed corporate renewal filing.

Our client address had changed and the mail was not forwarded to them by the US Postal system and then they received an application for reinstatement as forwarded by the US Postal system.

The client moved an believed that the renewal had been filed. Upon receipt of the form for reinstatement, they promptly brought it to our attention, and we have made the fully aware of the filing requirements.

We are therefore requesting that you accept the reinstatement based upon a change of address.

Should you have any questions, please feel free to contact the client.

Thank you,
Sincerely,

David Hernandez