

PLEASE READ ALL INSTRUCTIONS BEFORE COMPI

FILED
Jul 04, 2002 8:00 am
Secretary of State

07-04-2002 90562 028 ***150.00

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V 15056 ✓

1. Corporation Name

STUDIO PRODUCTIONS, INC.

B0127039

2. Principal Office Address

180 W. 22nd STREET

Suite, Apt. #, etc.

City & State

HI ALEAH, FL

Zip

Country

33012

3. Mailing Office Address

180 W. 22nd STREET

Suite, Apt. #, etc.

City & State

HI ALEAH

Zip

Country

FL

33012

4. Date Incorporated or Qualified
To Do Business in Florida

2/20/92

5. FEI Number

65-0315710

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

ALBERTO E. VELASQUEZ

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

180 W. 22nd STREET

Suite, Apt. #, Etc.

City

HI ALEAH

State
FL

Zip Code

33012

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

Alberto E. Velasquez

REGISTERED AGENT MUST SIGN

Date

5/29/02

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
PTD	ALBERTO E. VELASQUEZ	180 W. 22 nd ST.	HI ALEAH, FL 33012

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:

Alberto E. Velasquez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(305) 883-0064
5/29/02

Daytime Phone #

CR2E061 (9/01)

Attachment
B0127019

STUDIO PRODUCTIONS, INC.

180 W. 22ND Street
Hialeah, FL 33012

Office: (305) 883-0064

Alberto E. Velasquez
President

May 30, 2002

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE: Fed ID# 65-0315710
Document # V15056

To Whom It May Concern:

Kindly be advised that I did not receive the Annual Report. I am now realizing that since I did not get the form I forgot to make the payment.

Enclosed is a check in the amount of \$150.00 dollars and a Corporation Reinstatement form. Kindly update your records and advise me as to the status.

Thank you in advance for your understanding.

Sincerely,

Alberto E. Velasquez