## 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000098073  1. Entity Name PUNCH BOXING & FITNESS, INC.				FILED 04 NOV -2 AM 10: 49		
Principal Place of Business 1145 71ST STREET MIAMI BEACH, FL 33141		Mailing Address 7365 SOUTHWEST 109TH TERRACE MIAMI, FL 33156		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. Principal Place of Business		3. Mailing Address				
Suite Apt # ate		1145 718+ Street Suite, Apt. #, etc.			• • • • • • • • • • • • • • • • • • •	
Suite, Apt. #, etc.				10222004 REIN-P	CR2E098 (6/04)	
City & State		MIZMI BEACH, FL		4. FEI Number 11-3652681	Applied For Not Applicable	
Zip	Country	33141	Country	5. Certificate of Status Des	sired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent Nar				7. Name and Address of New Registered Agent Pan Kalinowski		
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.				Street Address (P.O. Box Number is Not Acceptable)		
4TH FLOO	R		1146		710+ Ctoppt	
MIAMI, FL 33145				5 7   Street  mi Beach FL ZigCode 111		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept						
the obligations of registered agent.						
SIGNATURE Signature, typed or privide name of equistered agent smalle if applicable. (NOTE: Registered Agent signature required when relinstating)  DITE						
FILE NOW!!! FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00						
10.	OFFICERS AND		11.	ADDITIONS/CHANGES T	O OFFICERS AND DIRECTORS IN 11	
TITLE NAME	KALINOWSKI, DANIEL	☐ Delete	TITLE NAME	0000	42755170 01074008 **150,00	
STREET ADDRESS CITY-ST-ZIP	1145 71ST STREET MIAMI BEACH, FL 33141		STREET ADDRESS CITY-ST-ZIP	11/15/04	] J1U/4UU8 **15U,UU 	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS	•		
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP		Change   Addition	
NAME		□ Delete	NAME		. Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	DEBICTATE	MENT O	
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NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP	portify that the information supplied with	this filing does not qualify for	CITY-ST-ZIP	Section 119 07(3Vi). Florida Sta	atutes. I further certify that the information	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiven or Instee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
1000 los 200 0000						
SIGNATURE: SIGNATURE AND TYPED OF PUMPED WARE OF SIGNATE OF DIRECTOR DIRECTOR DIRECTOR DIRECTOR						





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State of Florida Department of State Division of Corporations ATTN: MICHELLE Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

via facsimile to: 850-245-6017

November 2, 2004

RE: PUNCH BOXING & FITNESS DOC #P02000098073, FEI #11-3652681

Dear Michelle.

As we did not receive any notification from the Division of Corporations of our failure to file our 2004 Annual Report on time, and since we assumed that our original check #1341, (amount \$150.00) sent to the Division on April 18, 2004, was indeed processed, we beg that you process that check and Annual Report, waiving the reinstatement fee just this once!

We truly believed this was resolved when we sent the payment out in April. But now the Dept of Agriculture is withholding our license until we resolve this issue with the Division of Corporations-help!

Thanking you in advance for your assistance in this matter, we remain,

Gratefully yours

Dan Kalinowski

Owner

Punch Boxing & Fitness, a/k/a

Normandy Gym.

## TRAIN HARD BE READY