

FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PM 2:57

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONSSECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 727642

1. Corporation Name

Greater Miami Junior
Bowling Association, Inc.

2. Principal Office Address

9275 S.W. 40 St.

Suite, Apt. #, etc.

City & State

Miami, Fla.

Zip

33165

Country

U.S.A.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

Oct. 4, 1973

5. FEI Number

N/A

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

Danielle Graham

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

9275 S.W. 40 St. 600024164896
10/27/03--01051--002 **245.00

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33165

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

Danielle Graham

Date Oct. 23, 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-	Joan Dillon	9352 S.W. 40 Terr.	Miami, Fla. 33165
S/T	Danielle Graham	9275 S.W. 40 St.	Miami Fla. 33165
VP	Becky Murray	1930 N.E. 182 St.	N. Miami Beach, Fla. 33162
D	Mark Watson	16800 S.W. 107 Ct.	Miami, Fla. 33157
D	Ana Koff	6490 S.W. 102 St.	Miami, Fla. 33156
D	Elizabeth Martelli	26723 S.W. 122 Pl.	Miami, Fla. 33032

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

Danielle Graham

Oct. 23, 2003

Date

Daytime Phone #

305-
221-1221 ext. 14

CPS26081 (10/02)

2/10/25