

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
02 FEB -8 PM 3:53

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # 1-00000003394

1. Corporation Name

GRAND SLAM FIREWORKS CO., INC.

2. Principal Office Address

8550 Route 224 Drive

Suite, Apt. #, etc.

City & State

Deerfield, Ohio

Zip

44411

Country

USA

3. Mailing Office Address

8550 Route 224 Drive

Suite, Apt. #, etc.

City & State

Deerfield, Ohio

Zip

44411

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

June 15, 2000

5. FEI Number

31-1686173

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

International Business Incorporators

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

8108 S.W. 103rd Avenue

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33173

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

Marie P. Jorczak, President

Date

2/6/02

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
Chairman	Larry Lomaz	8550 Route 224 Drive	Deerfield, Ohio 44411
Pres.	Larry Lomaz	8550 Route 224 Drive	Deerfield, Ohio 44411
Sec.	Larry Lomaz	8550 Route 224 Drive	Deerfield, Ohio 44411
Treas.	Larry Lomaz	8550 Route 224 Drive	Deerfield, Ohio 44411

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)(g), 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

Larry Lomaz, President

1/30/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MB