

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN 25 PM 12:27

DOCUMENT # NO2000004486

1. Corporation Name

Top Rank Sports, Inc.

REINSTATEMENT-04-08

6/25/08

2. Principal Office Address - No P.O. Box #

255 W. 13th Street

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Riviera Beach FL

City & State

Zip

33404

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

JANUARY 6, 2003

5. FEI Number

02-0627391

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

Lee, Eugene

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

255 W. 13th Street

Suite, Apt. #, Etc.

City

Riviera Beach

State

FL

Zip Code

33404

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Eugene Lee

REGISTERED AGENT MUST SIGN

Date 6-12-08

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
Pres.	Eugene Lee	255 W. 13 th Street	Riviera Beach FL ³³⁴⁰⁴
VP	John Barrett	212 S.W. 11 th Street	Boynton Beach FL ³³⁴³⁵
VP ²	Robert Anderson	105 4 th Street	Lake Park FL ³²⁹⁰³
TREAS.	Portia Gallon	5698 Gramercy Dr.	West Palm Beach FL ³³⁴⁰⁷
Sec.	Elizabeth Coleman	1246 W. 26 th Street	Riviera Beach FL ³³⁴⁰⁴

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 contained in Chapter 119, 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:

Eugene Lee

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-12-08

Date

Daytime Phone #