

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 OCT -4 PM 3:46

DOCUMENT # N03000007205

1. Entity Name
MIAMI CURVE BASEBALL, INC.



Principal Place of Business
6895 SW 31 ST
MIAMI, FL 33155

Mailing Address
~~6895 SW 31 ST~~
~~MIAMI, FL 33155~~

REINSTATEMENT 05



2. Principal Place of Business

3. Mailing Address

4218 SW 9 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09232005 REIN-NP CR2E099 (6/04)

City & State

City & State
MIAMI, FL.

4. FEI Number
20-0139762

Applied For
Not Applicable

Zip

Country

Zip
33134

Country
USA.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLAIR, DONALD
6895 SW 31 ST
MIAMI, FL 33155

Name

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

City

FL

Zip Code

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

Don Blair

9-26-05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$61.25
After January 1, 2006, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME BLAIR, DONALD
STREET ADDRESS 6895 SW 31 ST
CITY - ST - ZIP MIAMI, FL 33155

TITLE ☒ Change ☐ Addition
NAME 4218 SW 9 ST.
STREET ADDRESS MIAMI, FL. 33146
CITY - ST - ZIP

TITLE D ☐ Delete
NAME CATA, ELLY
STREET ADDRESS 6895 SW 31 ST
CITY - ST - ZIP MIAMI, FL 33155

TITLE ☒ Change ☐ Addition
NAME 4218 SW 9 ST.
STREET ADDRESS MIAMI, FL. 33146
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME 900060215069
STREET ADDRESS 10/04/05--01053--015 **\$61.25
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing 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 supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 617, 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.

SIGNATURE:

Don Blair

9-26-05 (205) 241-9680

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone