## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CARPORATION PREINSTATEMENT	Г
DOCŮMENT #  1. Corporation Name	N06



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

337

America's Corvette Club, Inc.

FILED

00 FEB 17 PM 1: 15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

2. Principal Office Address 10158 S.W. 56 Street Suite, Apt. #, etc.			3. Mailing Office Address 10158 S.W. 56 Street Suite, Apt. #, etc.		a-a-priaeae	T 00 N		
		Suite, Apt. #,			A. Date Incorporated or Qualified To Do Business in Florida  11 / 97 / 94			
City & Stat	e		City & State.	City & State		To Do Business in Florida 11/27/84		
Cooper City, Fl.			Cooper City, F1.		<b>5.</b> FEI Number Applie 65–0140297 Not Ap			
<sup>Žip</sup> 33328	3	Country	<sup>Zig</sup> 33328	Country USA	6. CERTIFICA	ATE OF STATUS DESIRED	75 Additional Fee required or a Certificate of Status	
	1		<b>7.</b> N	lame and Address of Current R	-			
	Name <b>50000314538</b> Janet Fields -02/24/0001004					3967-7 )1004 <b>(</b> 02		
	Street Address (P.O. Box Number is Not Acceptable) 10158 S.W. 56 Street				**************************************			
Suite, Apt. #, Etc.							•••	
	City	Cooper City	•			State Zin Septe		
8. I, being Signature of Registered	of C	e registered agent of the	e above named corpo	ration, am familiar with and accep	t the obligations of se	Date 214 00	Fac	
9. Names	and Street Ad	dresses of Each Office	nunne sei sen en e	rida nonprofit corporations must li	st at least 3 directors)	\		
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip			
P/D	Diaz, Joanne -7623-Sunflowe		-7623-Sunflower-D	rive Margate, Fl. 33063				
VP/D	Valenti	ine, Bill		213 South State I	oad 7 Hollywood, Fl. 33023			

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 filling 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.

1900 Lakeshore Drive

10158 S.W. 56 Street

9531 N.W. 21 Manor

SIGNATURE:

S/D

T/D

D

Schneider, Jon

Cowqill, Mary

Fields, Janet

Weston, F1. 33326

Sunrise, Fl. 33322

Cooper City, Fl. 33328 600003145386---7 -02/24/00 --01004--003