

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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AND
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96 DEC 26 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *N94000002970*

1 Corporation Name

The George Mira Celebrity Golf Classic, Inc

Principal Place of Business

*2300 Palm Drive
Homestead, FL 33035*

Mailing Address

*c/o Community Bank
Attn Roger F. Kurtz
20001 S.W. 157th Ave
Homestead FL 33033*

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2 New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

See above

4 Date Incorporated or Qualified
To Do Business in Florida

6/16/94

Suite, Apt. #, etc

Suite, Apt. #, etc.

5. FEI Number

65-0514812

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	George Mira	19225 S.W. 128th Ct.	Miami, FL 33177
VD	Joel Furnari	2230 S.E. 6th Place	Homestead FL 33033
TD	Roger F. Kurtz	1400 H Jefferson Dr.	Homestead, FL 33034

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REINSTATEMENT

12/26/96

8. Name and Address of Current Registered Agent

*James W. McDonald Jr.
15600 S.W. 200th St. Suite 306
Homestead FL 33033*

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc

City

State

Zip Code

FL

10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

James W. McDonald Jr.

REGISTERED AGENT MUST SIGN

Date *12/21/96*

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

James W. McDonald Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roger F. Kurtz Treasurer

Date

(305) 245-2211

Daytime Phone #

CR2E040 (12/95)