

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N95000004247**

1. Corporation Name

**Tampabay Inner-City Youth Tennis
Academy, Inc**

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

2725 66th Terr. S

Suite, Apt. #, etc

City & State

ST PETERSBURG FL

Zip

33712

Country

USA

3. Mailing Office Address

2725 66th Terr. S

Suite, Apt. #, etc

City & State

ST. PETERSBURG FL

Zip

33712

Country

USA

REINSTATEMENT 01-07

CR2E081 (1/07)

4. Date Incorporated or Qualified
To Do Business in Florida

09/06/1995

5. FEI Number

59-3343074

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

ALEXANDER CABRERA

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

945 ALCARAZ WAY SOUTH

Suite, Apt. #, Etc.

City

ST. PETERSBURG

State

FL

Zip Code

33705

☐ 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.

800108474838

08/22/07--01046--017 \$500.00

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

REGISTERED AGENT MUST SIGN

Date **08/09/07**

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
P	MARVA CABRERA	945 ALCARAZ WAY, SOUTH	ST. PETERSBURG FL 33705
V-Pres	LIONEL ROBERTS	2725 66 th TERR. SOUTH	ST PETERSBURG FL 33712
V-Pres	WAYNE CABRERA	945 ALCARAZ WAY, SOUTH	ST PETERSBURG FLORIDA 33705
REG Agent	ALEXANDER CABRERA	945 ALCARAZ WAY, SOUTH	ST. PETERSBURG FL 33705
Vice President	MERLENE ROBERTS	2725 66 th TERR SOUTH	ST. PETERSBURG FL 33712
Vice PRES	MICHAEL CABRERA	945 ALCARAZ WAY SOUTH	ST PETERSBURG FL 33705

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:

MARVA CABRERA

08/09/07

Date

727 867-5239

Daytime Phone #