

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		<b>FLORIDA DEPARTMENT OF STATE</b> Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> N96000004660			
<b>1. Corporation Name</b> South Florida Greyhound Association Inc.			
<b>2. Principal Office Address</b>		<b>3. Mailing Office Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI		City & State MIAMI Florida	
Zip	Country	Zip	Country
		33027	U.S.
<b>4. Date Incorporated or Qualified To Do Business in Florida</b>		<b>5. FEI Number</b> 65-0703835	
		Applied For Not Applicable	
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	

FILED  
01 AUG -6 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>7. Name and Address of Current Registered Agent</b>	
Name TERRY HANSEN	700004556997--0
Street Address (P.O. Box Number is Not Acceptable) 12421 SW 18 ST	08/27/01--01014--010 *****61.25 *****61.25
Suite, Apt. #, Etc.	
City MIAMI	State FL
	Zip Code 33027

**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 \_\_\_\_\_ Date \_\_\_\_\_

REGISTERED AGENT MUST SIGN

**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.	TERRY HANSEN	12421 SW 18 ST (D)	MIAMI FL 33027
VICE PRES	MIKE MORRISSEY	7218 W 4 AVE (D)	HALEAH FL 33014
SEC	GREG GETER	7218 W 4 AVE (D)	HALEAH FL 33014

**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 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.**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/12/01