

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED 99 NOV 15 AM 8:50 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # <u>1991000006205</u>					
1. Corporation Name <u>Bad Boys Wrestling, Inc. Club</u>					
Principal Place of Business <u>2047 22 Way SW</u> <u>Largo, FL 33774</u>			Mailing Address _____		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 5. FEI Number <u>59-3542261</u> Applied For <input type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>				SE 7th Edition of the Revised Florida Statutes	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City	State	Zip
Pres.	Mike Gulley D	1465 Drew St. # B	Clearwater	FL	33755
Treas.	Joe Miller D	1801 119 St. No.	Largo	FL	33778
Sec.	Ed Dickey D	2534 21 Pl., SW	Largo	FL	33774
8. Name and Address of Current Registered Agent <u>Bad Boys Wrestling Club, Inc.</u> <u>Mike Gulley D</u> <u>1465 Drew St. # B</u> <u>Clearwater, FL 33755</u>			9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City		
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 <u>Mike Gulley</u> Date <u>9-28-99</u> REGISTERED AGENT MUST SIGN			11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
12. 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: <u>Ed Dickey</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER/DIRECTOR			Date <u>9-28-99</u> Daytime Phone # _____		

CR2001 (12/98)