PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	WITE INSTRUCTION	O DEI ONE OC	71V11 LE 11190 1	FILED		
CORPORATION REINSTATEMENT	FLORIDA DEPARTMEI Secretary of S DIVISION OF CORPOR	State	03 M	AY 27 PH 12: 1	' O	
DOCUMENT # P 000000 6092			MALLA	RETARY OF STATE HASSEE, FLORID	i A	
1. Corporation Name Pop's GOLF RANGE INC.			000020518450 06/04/0301034018 **150.00			
2. Principal Office Address 6900 FRUITVILLE RP.	3. Mailing Office Address SAME		000020518450 06/04/03-01034017 **150.00			
Suko, Apt. #. etc.	Sulte, Apt. #, etc.		4- Date incorporated or Qualified To De Business in Ffortids OO/61			
City & Sieto SACLASOTA, FLA.	· · · · · · · · · · · · · · · · · · ·		65-098		Applied For Not Applicable	
34240 Country U.S.A.	Z'p Coun	1try 6	k	\$8.79 Ad	oftional Fee regulied	
7. Name and Address of Current Registered Agent Name GAZALL, GARY Street Address (P.O. Box Number is Not Acceptable) GBOO FRUIT VILLE RD, Suite, Apt. #, Etc.						
City GASCASOTA	CITY SARRASOTA			Zip Code 34240		
8. I, being appointed the registured egant of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.9503, F.S. Signature of Registered Agent Registered Agent MUST SIGN						
9. Names and Street Addresses of Each Officer and/or Director (Flored nonprofit corporations must list at least 3 directors)						
Titles Name of Officere and/or Directors			:	City / Stato / Zip		
RES GAZALL, GARY	SAZAIL, GARY 6800 FRUTTUILLS		RO SAR	5 Adas 0 TA, FLA. 34240		
V. RES PERNA, ROLPH	6800	FRATTVILLE	RP. SMR	ASOTA, FLA	34240	
	.					
<u> </u>						
10. I certify that i am an efficier or effector or the receiver or trustae empowered to execute this application as provided for in chapter 607 or 817, F.S. I further cortify that when filling this reinstatement application, the receiver for desolution has been eliminated, the corporate name satisfies the requirements of social 67.0401 or 617.0401, F.S. that all fees owned by the corporation have been paid and the hisrae of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicates on this application is true and accurate, and my alignature shall have the same legal effect as if made under eath. 5-23-03 (56) 762-4422						
SIGNATURE: 5-23-03 (561) 162-4422						

Pop's Golf Range Inc.

6800 Fruitville Rd. Sarasota, Florida 34240 Phone: 941-377-4807

Fax: 941-378-9778 E-mail: Popsgolfrange@aol.com

TO:

Uniformed Business Report; Division of Corporations

FROM:

Ralph Perna; Pop's Golf Range Inc.

DATE:

May 1, 2003

SUBJECT:

Federal ID Number Correction

Dear Agent,

-My company has had confusion on it's Federal ID Number. The problem is because the number 3, was accidentally transposed for a number 8. The correct Federal ID Number for Pop's Golf Range Inc. is 65-0984235. NOT 65-0934235.

We have spoken with several people in Tallahassee about the incorrect UBR Report for 2002, and we were to receive a correct UBR Report and expected the 2003 to be corrected as well. We never received the corrected 2002 as well as the 2003 UBR report. Despite our calls, our faxes, and mailed information to PO BOX 1500, Tallahassee, FL,32302-1500, I am now following up with this letter and payment.

Please be advised that check no. 635 for \$150 is to be applied to ID no. 65-0934235 that was to be corrected for ID no. 65-0984235 for 2002.

Also enclosed find check no. 636 for \$150 be applied to the now correct ID no. 65-0984235.

Also enclosed is a reference document number P00000006092.

Please help me correct this once and for all, if there are any questions please phone me directly on my cell phone at 561-762-4422.

Thank you for your time and consideration,

Sincerely.

Mr. Ralph S. Perna

Vice President