


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/22

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JAN 18 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000058374

1. Corporation Name

Pro Sports Financial Inc.

800 Fairway Drive
800 Fairway Drive

2. Principal Office Address

800 Fairway Drive

3. Mailing Office Address

800 Fairway Drive

Suite, Apt. #, etc.

370A

Suite, Apt. #, etc.

370A

City & State

Deerfield Beach, FL

City & State

Deerfield Beach, FL

Zip

33441

Country

USA

Zip

33441

Country

USA

REINSTATEMENT 0204

700042248987
10/27/04--01055--002 **35.00

4. Date Incorporated or Qualified
To Do Business in Florida

06/09/2000

5. FEI Number,
651020454

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

Peary Lee

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

800 Fairway Drive

Suite, Apt. #, Etc.

370A

City

Deerfield Beach

State

FL

Zip Code

33441

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

"See attached"

Date 10/26/2004

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 |
|--------|--------------------------------------|---|---------------------------|
| P | Jeffrey Rubin | 800 fairway Dr. #370a | Deerfield Beach, FL 33441 |
| | | | |
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| | | | |

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:

Jeffrey B. Rubin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/26/2004

Date

954-834-0996

Daytime Phone #

CR2001 (01/04)

Zed Z

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Pro Sports Financial
2. The principal office address: 800 Fairway Drive #370A
Deerfield Beach, Florida 33441
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/09/2000 Document number: P00000058374
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Mark Hollander

11410 N Kendall Drive #207

Miami, FL 33178

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

Peggy Lee

800 Fairway Drive #370A

(P.O. Box NOT acceptable)

Deerfield Beach, Florida 33441

The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Jeffrey Rubin, President

(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity.
I further agree to comply with the provisions of all statutes relative to the proper and complete performance
of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.*


(Signature of Registered Agent)

10/26/2004

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

954-834-0996
Peggy