

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P00000095106

1. Entry Name
AMERICAN JAI-ALAI ACADEMY, INC.



FILED

05 JAN 21 AM 11:32

Principal Place of Business
1935 NE 150TH ST
N MIAMI, FL 33181

Mailing Address
1935 NE 150TH ST
N MIAMI, FL 33181

SECRETARY OF STATE
REINSTATEMENT
TALLAHASSEE, FLORIDA



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

12282004 REIN-P CR2E098 (6/04)

City & State
City & State

4. FEI Number
65-1057803

Applied For
Not Applicable

Zip
Country

Zip
Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BAUTISTA, LUIS
AMERICAN JAI-ALAI ACADEMY, INC.
1935 NE 150TH ST
N MIAMI, FL 33181

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* DATE: 1-13-05

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAUTISTA, LUIS 1935 NE 150TH ST N MIAMI, FL 33181 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300045582653 <input type="checkbox"/> Change <input type="checkbox"/> Addition 01/28/05--01015--014 **150.00
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE: 1-13-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11 2002

October 13, 2004

From: American Jai-Alai Academy, Inc
1935 Northeast 150th Street
North Miami FL, 33181

To: Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

I am sending this note because the annual payment notice for the corporation was
~~never received. I am sending the payment along with this note. Since this corporation~~

has made these payments before, we realized that the notice had not been sent, but knew
the payment needed to be made. This corporation is sending this payment, even without
receiving the notice, because it wishes to avoid any problem that may arise due to non-
payment.

Sincerely,

Luis Bautista