

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 22 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000100437

1. Corporation Name

PALACE SPORTSBAR & CAFE, INC.

Principal Place of Business

4241 AVALON BLVD
MILTON FL 32570

Mailing Address

4241 AVALON BLVD
MILTON FL 32570

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

AS ABOVE

3. New Mailing Office Address, If Applicable

AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/24/2000

5. FEI Number

59-3677802

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DPVP	URICK, BRUCE	4241 AVALON BLVD	MILTON FL 32570
S	TOTTEN, BEH	PO BOX 386	VALPARAISO FL 32580

800024011748
10/22/03--01038--002 **150.00

8. Name and Address of Current Registered Agent

URICK, BRUCE
4241 AVALON BLVD
MILTON FL 32570

9. Name and Address of New Registered Agent

Name

SAME AS #8

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

Bruce Urick
REGISTERED AGENT MUST SIGN

Date

OCT 15, 2003

11. 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:

Bruce Urick
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCT 15, 2003

Date

(850) 994-5967

Daytime Phone #

CR20040 (7/03)

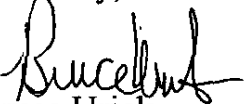
PALACE SPORTSBAR & CAFÉ, INC.
4241 Avalon Boulevard
Milton, FL 32583
(850) 981-6307

Dear Sir or Madam,

I am writing this letter to inform you that we have never been notified of the requirement to pay an annual fee of \$150.00. While we have been incorporated since October of 2000, we only opened our doors in September of 2002. If we did pay a fee at that time it would have been done through our first CPA unbeknownst to me. This is a small business (2 employees) and also my first, so at this time I have retained another CPA to keep us abreast of all the requirements in running a corporation.

I have enclosed a check for \$150.00 to cover this particular requirement. Thank you in advance for your assistance.

Sincerely,


Bruce Urick
President