

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

FILED

02 MAY -3 AM 9:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000105058

1. Corporation Name

EXTREME CHEERLEADING ASSOCIATION, INC.

Principal Place of Business

Mailing Address

11430 SW 95TH STREET
MIAMI FL 33176

11430 SW 95TH STREET
MIAMI FL 33176



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

2. New Principal Office Address, If Applicable

7242 SW 22 ST

Suite, Apt. #, etc.

MIAMI FL

City & State

33155

USA

Zip

Country

3. New Mailing Office Address, If Applicable

7242 SW 22 ST

Suite, Apt. #, etc.

MIAMI FL

City & State

33155

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/09/2000

5. FEI Number

65-1055625

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
D	SANCHEZ, JOSEPH	11430 SW 95TH STREET	MIAMI FL 33176

000005509348 0

-05/14/02--01057--002

****150.00 ****150.00

PR 5/13

8. Name and Address of Current Registered Agent

SANCHEZ, JOSEPH

11430 SW 95TH STREET

MIAMI FL 33176

9. Name and Address of New Registered Agent

Name

JOSEPH SANCHEZ

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

7242 SW 22 ST

Suite, Apt. #, Etc.

MIAMI

City

State

FL

Zip Code

33155

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

4/30/02

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/30/02 305-804-4135

Daytime Phone #

CR2040 (801)

April 30, 2002

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

RE: Extreme Cheerleading Association, Inc.
FEI # 65-1055625

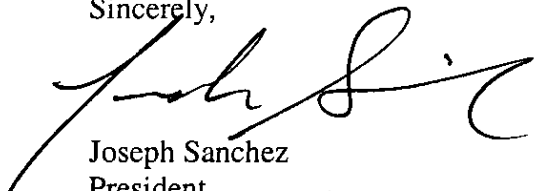
To Whom It May Concern:

Please be advised that we never received the first report for 2001. We submitted the second report with payment that was returned for an error in the FEI Number. We never received the rejected report for 2001, although you did deposit our check.

Please find an application for reinstatement along with the \$150.00 fee for 2002. We respectfully request any penalties and fees be waved in accordance with our conversation today with Michelle Milligan of your office.

Thank you for your attention to this matter.

Sincerely,



Joseph Sanchez
President