

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 25 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000093299

1. Corporation Name

CHEER CHAMPS-THE CHEER GEAR STORE, INC.

Principal Place of Business

3408 WEST MAIN STREET
TAMPA FL 33607

Mailing Address

3408 WEST MAIN STREET
TAMPA FL 33607

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

2. New Principal Office Address, If Applicable

3408 W. MAIN ST
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

09/24/2001

5. FEI Number

59-3749809

Applied For

Not Applicable

City & State

TAMPA FL

City & State

Zip

Country

33607

Zip

Country

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
PD	BARCELO, JACALYN A. KIRSCHNER	3408 WEST MAIN STREET 345 BAYSHORE BLVD #412	TAMPA FL 33607 33606

700009209117

11/25/02--01086--009 **150.00

8. Name and Address of Current Registered Agent

BARCELO, JACALYN
3408 WEST MAIN STREET
TAMPA FL 33607

9. Name and Address of New Registered Agent

Name PATTY HENSLEY, ACCOUNTING PROFESSIONAL
Street Address (P.O. Box Number is Not Acceptable)
12821 N. FLORIDA AVENUE
Suite, Apt. #, Etc. SUITE 6-125
City TAMPA State FL Zip Code 33612

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 11-21-02

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:

Jacalyn A. Kirschner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-21-02 813-382-8885

CHEER CHAMPS-THE CHEER GEAR STORE, INC.
3408 W. Main Street
Tampa, Fl. 33607

November 22, 2002

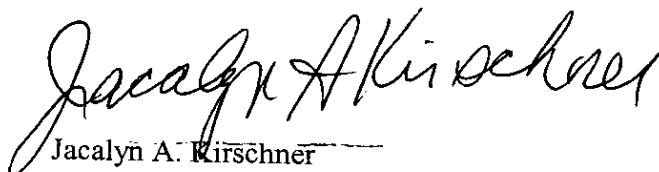
Department of State
Department of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir or Madame:

Attached you will find my application for reinstatement along with a check in the amount of \$ 150.00. During the past year I have moved twice and been through a divorce in which several change of address forms were filed by me and my ex-husband. Due to several change of address forms being filed, the post office was holding some of my mail. Also the renewal form may have been delivered to my ex-husband and he would not forward any of my mail. I did not receive the renewal notice for my corporation and due to the circumstances I am asking that you abate the reinstatement fee.

Thank you for your help and consideration in this matter.

Sincerely,


Jacalyn A. Kirschner