

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

192

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 APR 25 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PO2000011333**

1. Corporation Name

LANDMARK SPORTS BAR, INC.

400074064124
05/05/06--01030--027 **450.00

W06000017902

REINSTATEMENT

04-06 RSC

CR2E081 (12/05)

2. Principal Office Address

3135 W. BROWARD BLVD

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft Lauderdale, FL

City & State

same

Zip

33312

Country

BROWARD

Zip

same

Country

same

4. Date Incorporated or Qualified
To Do Business in Florida

3-1-04

5. FEI Number

20-1007442

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

GEORGE maffei + maffei, P. A.

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

633 SE 3RD AVE

Suite, Apt. #, Etc.

STE 4-R

City

Ft. Lauderdale

State

FL

Zip Code

33301

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

3-1-04

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
Pres.	DWAYNE TOOMER	3135 W. BROWARD BLVD	Ft Laud, FL, 33312

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 contained in Chapter 119, 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

4-8-06

Date

954 996-5485

Daytime Phone #

298

Landmark Sports Bar, Inc.
3135 W. Broward Blvd.
Ft. Lauderdale, FL 33312

Debra S. Cooper, Document Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Reinstatement
Ref. # P02000011333

Dear Ms. Cooper:

Pursuant to the instructions in your letter of April 17, 2006, please accept this writing as our formal declaration that Landmark Sports Bar, Inc. did not receive copies of the uniform business reports/corporate annual reports in the years 2004, 2005 and 2006.

If you should have any questions or if you should need any additional information, please do not hesitate to contact me at 954-496-5485. Thank you for your attention to this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read "Dwayne Toomer", with a long horizontal flourish extending to the right.

Dwayne Toomer, Pres.
Landmark Sports Bar, Inc.