


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 30 PM 2:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000012391

1. Corporation Name

ESPV BALL SERVICE, INC.

Principal Place of Business	Mailing Address
8941 SOUTHWEST 182ND TERRACE MIAMI FL 33157	8941 SOUTHWEST 182ND TERRACE MIAMI FL 33157



REINSTATEMENT 03

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02/04/2002	
City & State		City & State		5. FEI Number	
Zip		Country		04-3600819	
City & State		City & State		Applied For	
Zip		Country		Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$8.75 Additional Fee required for a Certificate of Status	

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PSD	ESPINOSA, ELVIS M	8941 SOUTHWEST 182ND TERRACE	MIAMI FL 33157
VTD	GUZMAN, TANIA	8941 SOUTHWEST 182ND TERRACE	MIAMI FL 33157

900024329055  
10/31/03--01025--004 \*\*150.00

J. Guzman

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
SP (GBL & UTRERA, P.A. 180 SW 2ND ST. ATLANTA, GA MIAMI FL 33157		Name Tania Guzman Street Address (P.O. Box Number is Not Acceptable) 8941 SW 182nd Terr Suite, Apt. #, Etc. City Miami State FL Zip Code 33157	

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 AgentTania Guzman  
REGISTERED AGENT MUST SIGN

Date

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**ESPY BBall Service, Inc.**  
**8941 S.W. 82<sup>nd</sup> Terrace**  
**Miami, FL 33157**

October 27, 2003

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

Re: ESPY BBall Service, Inc.  
F.E.I.N. - 04-3600819

Dear Sir or Madam:

I am the Vice-President of ESPY BBall Service, Inc. I recently became aware that my corporation lapsed with the state. Please be advised that the necessary renewal documents were never received by my office. I have enclosed a reinstatement form to update my company along with a check in the amount of \$ 150.00 for the renewal fee

Based on the foregoing, I respectfully request that you please remove the late filing penalties and accept my reinstatement form. Your help and understanding in this matter would be greatly appreciated.

Sincerely,



Tania Guzman  
Vice-President

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Enclosures