

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
05 FEB -8 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000030282

**1. Corporation Name**

TOTAL SPORTS WORLDWIDE, INC.

119 Woodcreek Drive

**2. Principal Office Address**  
119 Woodcreek Drive

**3. Mailing Office Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Safety Harbor, Florida

City & State

Zip  
34695

Country  
USA,

Zip

Country

**4. Date Incorporated or Qualified**  
To Do Business in Florida 04/24/1995

**5. FEI Number**

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  
Tena Hamm

Street Address (P.O. Box Number is Not Acceptable)  
221 W. Goolsby Blvd.

Suite, Apt. #, Etc.

City  
Deerfield Beach

State  
FL

Zip Code  
33442

000046901940

02/21/05--01010--022 \*\*1050.00

**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

*Tena Hamm*

REGISTERED AGENT MUST SIGN

Date

2/1/05

**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
P	Vincent Stona	119 Woodcreek Drive	Safety Harbor, FI 34695
S/T	Jim Crawley	119 Woodcreek Drive	Safety Harbor, FI 34695
C	Ken Peterson	119 Woodcreek Drive	Safety Harbor, FI 34695

**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 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:

*Ken Peterson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-1-05

Daytime Phone #

727-781-4944

CR2E081 (01/04)