

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 AUG -8 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200057284962
07/11/05--01013--012 **150.00

04-05

DOCUMENT # P03000089427

1. Corporation Name

David Vivian Jr. Racing Stable Inc.

2. Principal Office Address

3804 East Shore Rd

Suite, Apt. #, etc.

City & State

Miramar FL

Zip

33023

Country

Broward

3. Mailing Office Address

3804 East Shore Rd

Suite, Apt. #, etc.

City & State

Miramar FL

Zip

33023

Country

Broward

**4. Date Incorporated or Qualified
To Do Business in Florida**

8/14/2003

5. FEI Number

56-2385685

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

David Vivian Jr.

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

3804 East Shore Rd

Suite, Apt. #, Etc.

City

Miramar

State

FL

Zip Code

33023

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

David Vivian Jr.

REGISTERED AGENT MUST SIGN

Date 6-2-05

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
Pres	David Vivian Jr.	3804 East Shore Rd	Miramar FL 33023

200055828692
06/06/05--01055--014 **250.00

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:

David Vivian Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-2-05 954-319-2423

Date

Daytime Phone #

CRCE081 (01/05)