

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

97 NOV 20 AM 9:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



APPLICATION  
FOR  
REINSTATEMENT



DOCUMENT # P94000040095

1. Corporation Name

GLOBAL GOLF ENTERPRISES, INC.

Principal Place of Business

5401 GRAND PARK PLACE  
BOCA RATON FL 33486

Mailing Address

5401 GRAND PARK PLACE  
BOCA RATON FL 33486

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/27/1994

5. FEI Number

65-0510527

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$0.75 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)	City / State / Zip
PD	VALENTINE, TREVOR	5401 GRAND PARK PLACE	BOCA RATON FL 33486
VD	MILBOURNE-CLARKE, LAWRENCE	199 E ARLINGTON DRIVE	CLAREMONT CA 91711
STD	VALENTINE, CHERYL M	5401 GRAND PARK PLACE	BOCA RATON FL 33486 600002354816--1 -11/21/97-01118-011 11/20/97 758.75 REINSTATEMENT

8. Name and Address of Current Registered Agent

VALENTINE, TREVOR  
5401 GRAND PARK PLACE  
BOCA RATON FL 33486

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

CR25040 (8/97)

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.

Signature of  
Registered Agent

*Trevor Valentine*

REGISTERED AGENT MUST SIGN

Date *11/20/97*  
*Trevor Valentine*  
*November 15/97*

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes  No

(See other side for information  
on intangible tax.)

12. 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:

*Trevor Valentine*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nov. 15<sup>th</sup> /97 (361)343-5042  
Date  
Daytime Phone #