| (| صية والع | PLEASE READ | ALL INSTRUC | TIONS BEFORE | | ING THIS FORM. | mal. | |
|--|--|---|--|---|--|--|--------------------------|--|
| CORPORATION FLORIDA DEPARTMENT OF STATE REINSTATEMENT Katherine Harris Secretary of State Secretary of State | | | | | FILED OI JAN 12 AM 8: 56 | | | |
| ļ | _i, | | | CORPORATIONS | (. | | | |
| DOCUMENT # 195000082458 | | | | | SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | |
| | | Target Spi | orts, Iv | NC. | | | | |
| - II | al Office Addr | | 3. Mailing Office Add | Iress / | 1 | | | |
| 5770 SW 42" Terre 5770 SW 42" Terre | | | | | _ | | | |
| Suite, Apt. # | Suite, Apt. #, etc. | | | | | 4. Date Incorporated or Qualified | | |
| City & State |) | | City & State | | ···] | ness in Florida 10-1-9 | 5 ied For | |
| | th MI | any Florida | South Miam | | 5. FEI Numbe | | Applicable | |
| zip 331 | 55 | Country | zip 33155 | Country | 6. CERTIFICATE | OF STATUS DESIRED S875 Additional F | ee required of Status | |
| | 7. Name and Address of Current Registered Agent | | | | | | | |
| | Name Michael Dowling 000003575940- | | | | | | 6 | |
| I | Street Address (P.O. Box Number is Not Acceptable) | | | | | -01/26/01010260 | 20 | |
| | Suite, Apt. #, Etc. | | | | | <u>****158.75_****1</u> | 8.15 | |
| • • | City | | | | | State Zip Code | · · · · · · | |
| Boca Raton | | | | | | FL 33428 | <u> </u> | |
| 8. I, being Signature o Registered | of | Michael | <u> </u> | | obligations of sectic | Date | CR2ED81 (3/99 | |
| 9. Names | and Street A | ddresses of Each Officer and | l/or Director (Florida nong | profit corporations must list at | least 3 directors) | | | |
| Titles | } | Name of Officers and/or Directors | | Street Address of Ea Officer and/or Direct | | City / State / Zip | | |
| Pres. | Rei | ne Rodrig | | 70 Sw 42 ter. | Sound the | South Miami, Pl. 33 | 1<< | |
| lies. | V.C | te roomig | uer 57 | 40 50 410 100. | 1000 100 100 100 100 100 100 100 100 10 | source many C. 55 | | |
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| 10 . I certify | y that I am an | officer or director or the recei | ver or trustee embowered | d to execute this application as | provided for in cha | pter 607 or 617, F.S. I further certify that when | n filing | |
| this rei | instatement a by the corpora | pplication, the reason for diss ation have been paid and the | olution has been eliminate names of individuals liste | ed, the corporate name satisfie d on this form do not qualify fo | es the requirements r an exemption und | of section 607.0401 or 617.0401, F.S., that a er section 119.07(3)(i), F.S. The information in | ll fees | |
| on this | | · · · · · | | ame legal effect as if made unc | ier oath. | | | |
| SIGNA | TURE: _ | IGNATURE AND TYPED OR PRI | Rent Ron | driguer DFFICER OR DIRECTOR | for 8 | 2 | 107 | |

ON TARGET SPORTS, INC.

Miami, January 8, 2001

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

To whom it may concern:

Enclosed please find a Corporate Reinstatement form. I am returning this form due to my alarming surprise that my corporation had not been renewed. Unfortunately, I discovered this situation upon applying for a loan.

I did not receive any renewal forms nor was I informed of the impending cancellation.

Please review your records to verify if the original renewal forms were returned to your offices. I never received any such documents.

Along with the Reinstatement form, you will also find a check for \$158.75 to cover these costs as well as a Certificate of Status.

I greatly appreciate your attention to this matter

Sincerely,

Rene Rodriguez President

5770 SW 42nd Terrace. South Miami. FL 33135 Tel. 305-607-5107 Fax: 305-663-6010, e-mail: RRodriguezOTS@aol.com