PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
96 DEC 31 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000095207**

1. Corporation Name

SNEAKERS SPORTS GRILL, INC.

REINSTATEMENT 1996 MWB

Principal Place of Business	Mailing Address
10750 ATLANTIC BLVD. UNIT 8 JACKSONVILLE FL 32233	10750 ATLANTIC BLVD. UNIT 8 JACKSONVILLE FL 32233

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
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 12/15/1995

5. FEI Number: 59-3348789 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $87.5 Additional Fee is 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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	BERLIN, DAVID A	~~527 PELICAN KEY~~ 1501 SPINDRIFTER LANE	~~ATLANTIC BEACH FL 32233~~ NEPTUNE BEACH, FL 32266
			600002046306--7 -01/06/97--01013--005 ****138.75 ****138.75
			600002046306--7 -01/06/97--01013--006 ****236.25 ****236.25

8. Name and Address of Current Registered Agent

ALLEN, GLENN K
353 EAST FORSYTH STREET
JACKSONVILLE FL 32202

9. Name and Address of New Registered Agent

Name: DAVID K. HATTEN
Street Address (P.O. Box Number is Not Acceptable): 1112 THIRD STREET
Suite, Apt. #, Etc.: SUITE 7
City: NEPTUNE BEACH | State: FL | Zip Code: 32266

CR2E040 (7/96)

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: David K. Hatten — Date: Aug. 20, 1996
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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: X David Berlin — X 8/20/96 — 904-998-0072
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: DAVID BERLIN
Date
Daytime Phone #