

1042

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 AUG 17 PM 1:30

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000006840

1. Corporation Name

B & N Performance Incorporated

2. Principal Office Address

900 NW 6th Avenue

Suite, Apt. #, etc.

City & State

Fort Lauderdale, Fl.

Zip

33311

Country

U.S.A.

3. Mailing Office Address

900 NW 6th Avenue

Suite, Apt. #, etc.

City & State

Fort Lauderdale, Fl.

Zip

33311

Country

U.S.A.

REINSTATEMENT 01-05

03/21/05 90092 044 \$150.00
06/14/05 01016 021 \$600.00

4. Date Incorporated or Qualified
To Do Business in Florida

01/17/97

5. FEI Number

65-0732393

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

Fleming, Benjamin

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

~~XXXXXXXXXXXXXXXXXXXX~~ 2208 N.W. 59th Terrace

Suite, Apt. #, Etc.

68-A

City

Lauderhill, Fl. 33313

State

FL

Zip Code

33313

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

Benjamin Fleming

REGISTERED AGENT MUST SIGN

Date

8-16-05

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/D	Fleming, Benjamin	2208 N.W. 59th Terr.	Lauderhill, Fl. 33313

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: *Benjamin Fleming*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8-16-05

Daytime Phone #

CR2E081 (01/05)

2 of 2

Tel. (954) 547 - 6258
Fax (954) 846 - 0794

Jess Guzman, CPA
13356 N.W. 7th Street
Ft. Lauderdale, Fl. 33325

August 4, 2005

Mr. Gary Blankenbaker
Division of Corporation
P.O. Box 6327
Tallahassee, Fl. 32314

RE : B & N Performance, Inc.
900 NW 6th Ave.
Ft. Lauderdale, Fl. 33311
P97000006840

Dear Sir or Madam :

My client received a notice from your office dated July 26, 2005 (copy enclosed).

Per your request, a Corporation Reinstatement form is enclosed. As explained in my previous letter, the Corporation filed the original Annual Report but was apparently lost in the mail so we requested that the reinstatement fee be waived.

If you have any questions, please do not hesitate to contact the undersigned.

Very truly yours,

