

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 MAR 16 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT P98000008022

1. Corporation Name

Pro Personal Training, Inc.

2. Principal Office Address
1973 NE 4th Street

Suite, Apt. #, etc.

#5

City & State

Deerfield Beach, FL

Zip

33441

Country

US

3. Mailing Office Address
1973 NE 4th Street

Suite, Apt. #, etc.

#5

City & State

Deerfield Beach, FL

Zip

33441

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida 05/23/1995

5. FEI Number
65-0810021

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

Manzel, Michael G.

Street Address (P.O. Box Number is Not Acceptable)
1973 NE 4th Street

Suite, Apt. #, Etc.

#5

City

Deerfield Beach, FL

State

FL

Zip Code

33441

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

[Signature]

Date

REGISTERED AGENT MUST SIGN

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
PSD	Manzel, Michael G.	1973 NE 4th Street #5	Deerfield Beach, FL 33441

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DIROCCO & COMPANY, C.P.A., P.A.
COMMERCIAL POINT PLAZA
3601 WEST COMMERCIAL BLVD. SUITE 39
FORT LAUDERDALE, FL 33309
(954) 358-4272
(954) 739-1054

March 11, 2004

Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Pro Personal Training Inc.
Document # P98000008022
Reinstatement

Gentlemen,

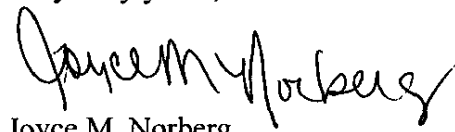
Our client has asked we write on his behalf regarding the late filing of the 2003 Uniform Business Report.

Please be advised that we process this corporation's accounting and bookkeeping on an annual basis. Mr. Manzel, the Company's President was unaware the 2003 filing had been missed until we advised him of such. After researching the Company's information with your division, we found that an address change was never submitted; therefore the 2003 report was never received.

Mr. Manzel has always filed his report on a timely basis, and in lieu of the above, we ask that you accept the enclosed reinstatement with the \$300 check (\$150 each for 2003 and 2004 filing) and abate the reinstatements fees and/or charges.

Thanking you in advance for your cooperation in this matter. I am,

Very truly yours,


Joyce M. Norberg
For the Firm

Enclosures

RECEIVED
MAR 11 2004
TALLAHASSEE, FL

FILED
MAR 11 2004
TALLAHASSEE, FL