

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # P98000019501

1. Corporation Name

PRO BALL MANAGEMENT, INC.

99 DEC 29 AM 8:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

12950 S.W. 103 Terrace  
Miami, Florida 33186

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

2. New Principal Office Address, If Applicable  
7685 S.W. 104th Street3. New Mailing Office Address, If Applicable  
7685 S.W. 104th Street4. Date Incorporated or Qualified  
To Do Business in Florida

2/27/98

Suite, Apt. #, etc.  
Suite 200Suite, Apt. #, etc.  
Suite 200

5. FEI Number

Applied For

City & State  
Miami, Florida 33156City & State  
Miami, Florida

65-0859835

Not Applicable

Zip Country  
33156 U.S.Zip Country  
33156 U.S.6. CERTIFICATE OF STATUS DESIRED ☐ ☒

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
PRESIDENT	SCOTT A. SHAPIRO	7685 S.W. 104 Street, #200	Miami, Florida 33156
SECRETARY	JOE RIVERA	7685 S.W. 104 Street, #200	Miami, Florida 33156
DIRECTOR	JEFFREY E. FEILER	7685 S.W. 104 Street, #200	Miami, Florida 33156

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-01/12/00--01005--004  
\*\*\*\*750.00 \*\*\*\*750.00

8. Name and Address of Current Registered Agent

JOE RIVERA  
12950 S.W. 103 Terr  
Miami, Florida 33186

9. Name and Address of New Registered Agent

Name

MARJORIE WOLASKY, ESQ.

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

7685 S.W. 104th Street

Suite, Apt. #, Etc.

Suite 220

City

Miami

State  
FLZip Code  
33156

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

Marjorie E. Wolasky

REGISTERED AGENT MUST SIGN

Date

12/27/99

11. This corporation owes 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:

Signature and Typed or Printed Name of Signing Officer or Director

President

Date

12/27/99

Daytime Phone #

305-670-7700