

09/28/05

10:45

WACHTELL LIPTON → 912122338525

NO.148

002

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

05 SEP 29 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # 980000091500

1. Corporation Name

JEB Racing Stable, Inc

300060591713
10/13/05--01079--007 **\$8.75300060591713
10/13/05--01079--008 **\$1050.002. Principal Office Address
1601 S Ocean Dr3. Mailing Office Address
1601 S Ocean DrSuite, Apt. #, etc.
#305Suite, Apt. #, etc.
#305City & State
Hollywood, FLCity & State
Hollywood, FLZip
33019Country
USAZip
33019Country
USA4. Date Incorporated or Qualified
To Do Business in Florida 10/27/19985. FEI Number
650872042Applied For
Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

NRAI Services, Inc.

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

2731 Executive Park Drive

Suite, Apt. #, Etc.

Suite 4

City

Weston

State
FLZip Code
33331

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.

NRAI Services, Inc.

Signature of
Registered Agentby: AGSON Hand ~ ASST SECDate 9/29/05

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
P	Thomas Moore	1133 5th Avenue	New York, NY 10128
V	Michael Maniscalco	1010 N Federal Hwy	Hallandale, FL 33009
S, T	Domenic Ciucci	18 Abingdon Avenue	Staten Island, NY 10308

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 807 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

Date

9/28/05
Daytime Phone #

CR2001 (10/07)