

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 MAR 10 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000077723

1. Corporation Name

DARREN BUCKNER'S ATA BLACKBELT ACADEMY, INC.
529 41 ST.
MIAMI BEACH, FL. 33140

2. Principal Office Address

529 41 ST.

3. Mailing Office Address

529 41 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI BEACH, FL 33140

City & State

MIAMI BEACH, FL 33140

Zip

33140

Country

USA

Zip

33140

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/31/99

5. FEI Number

65-0944994

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

MARCELL BUCKNER

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

529 41 ST.

Suite, Apt. #, Etc.

800013737548

03/10/03--01085--019 **500.00

City

MIAMI BEACH

State

FL

Zip Code

33140

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0501, F.S.

Signature of
Registered Agent

Marcell Buckner

REGISTERED AGENT MUST SIGN

Date 02/28/2003

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
STD	MARCELL BUCKNER	529 41 ST	MIAMI BEACH, FL 33140
PD	DARREN BUCKNER	529 41 ST	MIAMI BEACH, FL 33140

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:

Marcell Buckner

MARCELL BUCKNER, TREASURER

2/28/03 305-439-6225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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DARREN BUCKNER'S ATA BLACKBELT ACADEMY, INC.

529 41 ST.

MIAMI BEACH, FL 33140

(305) 439-6225

February 19, 2003

Florida Department of State
P.O. Box 6327
Tallahassee, FL. 32314-6327

Re: Annual Report: Darren Buckner's ATA Blackbelt Academy, In.
Document # P99000077723

Dear Sir/Madam:

Enclosed please find our Application for Reinstatement for the years 2000 through 2003 and a check for \$600.00 covering the annual fee for 2000, 2001, 2002 and 2003. Please be advised that we never received our annual report in 2000, therefore we never received the subsequent years' Annual Reports. An online search of our corporation is how we found out the State has administratively dissolved the corporation. I understand that other Florida corporations had similar issues with their annual reports in year 2001 mailings.

Please accept this application and the \$600.00 fee as timely filed and reinstate the corporation back in good standing. Please note the address change in the reinstatement application. If you require anything further, please contact me at your earliest convenience.

Sincerely,



Marcell Buckner, Treasurer
Darren Buckner's ATA Blackbelt Academy, Inc.