

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN 30 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 5-36685

1. Corporation Name

FINE SPORTS INC,

2. Principal Office Address

7990-SW 117th AVE

Suite, Apt. #, etc.

SUITE NO: 112

City & State

MIAMI - FLA

Zip

33183

Country

U.S.A

3. Mailing Office Address

7990-SW 117th AVE

Suite, Apt. #, etc.

SUITE NO: 112

City & State

MIAMI - FLA

Zip

33183

Country

U.S.A

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida

MARCH 16/91

5. FEI Number

593058129

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

VASHI K. KHEMLANI

000027910280

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

7990-SW 117th AVE

Suite, Apt. #, Etc.

SUITE NO: 112

City

MIAMI

State

FL

Zip Code

33183

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

Vashi K. Khemlani
REGISTERED AGENT MUST SIGN

Date

1/20/04

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
<u>D</u>	<u>VASHI K. KHEMLANI</u>	<u>7990-SW 117th AVE-SUITE 112</u>	<u>MIAMI - FLA 33183</u>

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:

VASHI K. KHEMLANI (DIRECTOR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/20/04

Daytime Phone #

(305) 279-9475

CP2E081 (10/02)

TO:

SECRETARY OF STATE
DIVISION OF CORPORATION
P.O. BOX: 6327
TAALLAHASSEE, FL N32314
ATTN: RE-INSTATEMENT SECTION

JAN,20,2004

DEAR SIRs:

REG : RE-INSTATEMENT SECTION
FINE SPORTS INC: DOCUMENT NO: S-36685

PLEASE BE ADVISED THAT DURING THE LAST FILING, I WAS INSTRUCTED TO FILL IN THE CHANGE OF ADDRESS ON BLOCK NO: 2 AND I HAVE NOTICED THAT SINCE THEN I HAVE NOT BEEN RECEIVING MY MAIL,NOR RENEWAL FORMS.

PLEASE FIND ENCLOSED THE FOLLOWING:

RE-INSTATEMENT FORM FOR THE YEAR 2003 AND 2004
(DULY FILLED WITH THE ADDRESS)

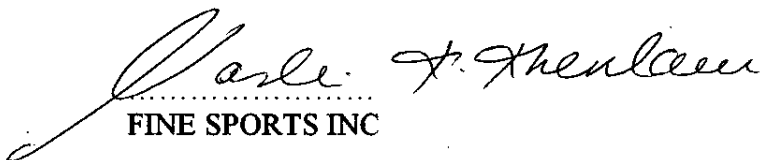
CHECK FOR : \$300.00 FOR THE 2 YEARS. # 4372 (2003/2004)

I WILL APPRECIATE IF YOU WILL KINDLY UPDATE YOUR RECORDS AND RE-INSTATE THE CORPORATION ON YOUR WEBSITE AND RECORDS,

THANKING YOU,

SINCERELY,

VASHI K. KHEMLANI
DIRECTOR


FINE SPORTS INC