

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 AUG -5 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **540381**

1. Corporation Name

TARGET PERFORMANCE SYSTEMS, INC.

2. Principal Office Address

800 S. DAKOTA AVE

Suite, Apt. #, etc.

414

City & State

Tampa FL

Zip

33606

Country

USA

3. Mailing Office Address

800 S. DAKOTA AVE

Suite, Apt. #, etc.

414

City & State

Tampa, FL

Zip

33606

Country

USA

400040222954

08/16/04--01076--001 **1658.75

4. Date Incorporated or Qualified
To Do Business in Florida

3-21-91

5. FEI Number

593058768

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

ULL FILING & SEARCH SERVICES, INC.

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

526 E. PARK AVE

Suite, Apt. #, Etc.

City

TALLAHASSEE

State

FL

Zip Code

32301

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

Alison Hana, ASST SEC

REGISTERED AGENT MUST SIGN

Date

8/5/04

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
PRES	MARK R. HUNTER	800 S. DAKOTA AVE, 414	Tampa, FL 33606
TRES	MARK R. HUNTER	800 S. DAKOTA AVE, 414	Tampa, FL 33606
SEC	MARK R. HUNTER	800 S. DAKOTA AVE, 414	Tampa, FL 33606
Dir	MARK R. HUNTER	800 S. DAKOTA AVE, 414	Tampa, FL 33606

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:

Mark R. Hunter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8-4-04 (813) 254-7571

Daytime Phone #