

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **V44355**

1. Corporation Name

THE SPORTS CARD BROKERAGE, INC.

W00-4866

Principal Place of Business

Mailing Address

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

2. New Principal Office Address, if Applicable

28 Eleuthera Drive

Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable

1640 New Highway

Suite, Apt. #, etc.

City & State

Ocean Ridge, FL

City & State

Farmingdale, New York

Zip

33435

Country

USA

Zip

11735

Country

USA

REINSTATEMENT 96-60

4. Date Incorporated or Qualified
To Do Business in Florida

June 16, 1992

5. FEI Number

65-0351070

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P, D	ROY TITUS	28 Eleuthera Drive	Ocean Ridge, FL 33435
S	BARBARA TITUS	28 Eleuthera Drive	Ocean Ridge, FL 33435
			300003168253--4 -03/14/00--01027--001 ***1200.00 ***1200.00
			300003168253--4 -03/14/00--01027--002 ****150.00 ****150.00
			300003168253--4 -03/14/00--01027--003

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent *******8.75**

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, Etc.

City
Tallahassee

State
FL

Zip Code
32301

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

John S. Hoeng
JOHN S. HOENG

Date **2/18/00**

REGISTERED AGENT MUST SIGN **JOHN S. HOENG**

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: **ROY TITUS**
RT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KE

CR2E081 (12/99)