

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DEC-7 PM 1:40
FID

DOCUMENT # 301345

1. Corporation Name

GENERAL OCEANICS, INC.

Principal Place of Business

Mailing Address

1295 NW 163RD ST
MIAMI FL 33169

P.O. BOX 694301
MIAMI FL 33269

REINSTATEMENT 00

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

01/28/1966

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-1203631

Applied For

Not Applicable

City & State

City & State

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

Zip

Country

Zip

Country

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

Title(s)
1

Name of Officers
and/or Directors
2

Street Address of Each
Officer and/or Director
3

City / State / Zip
4

CEO

COOK, REGIS

1295 N W 163RD ST

MIAMI FL

P

WOOD, RICHARD

1295 N W 163RD ST

MIAMI FL

200003510772-9
-12/21/00--01077--019
****750.00 ****750.00

12/13

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

COOK, REGIS
1295 N W 163 ST
MIAMI FL 33169

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Date 10-25-00

REGISTERED AGENT MUST SIGN

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REGIS S. COOK CEO

10-25-00

Date

305-621-2882

Daytime Phone #