

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
1996

FILED

96 NOV 25 AM 8:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J17837

1. Corporation Name

UNLIMITED MARINE POWER, INC.

Mailing Address

Principal Place of Business

5931 Ravenswood Road,
Ft. Lauderdale, Florida 33312

REINSTATEMENT

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

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable

1210 S.E. 5th Street

3. New Principal Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

2/1/88

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0041439

Applied For
Not Applicable

City & State

Deerfield Beach, Fla 33441

City & State

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED ☐

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	William C. First	262-91-7014 7175 S.W. 27th Pl Davie, Fla	33314
S/T	Jean G. Fleury	5931 Ravenswood Road	Ft. Lauderdale, Fla.

800002016428-3
-11/27/96-01102-004
***375.00 ***375.00

11-20-96

8. Name and Address of Current Registered Agent

George B. Grosheim
1210 S.E. 5th Street
Deerfield Beach, Florida 33441

9. Name and Address of New Registered Agent

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

George B. Grosheim
REGISTERED AGENT MUST SIGN

Date 11-1-96

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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

11-20-96

Date

Daytime Phone