PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 MAR 28 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000072796**

1. Corporation Name

NIGHT STALKER FISHING CHARTERS, INC.

Principal Place of Business	Mailing Address
~~75-A ENTERPRISE AVENUE~~ BIG PINE KEY FL 33043	~~75-A ENTERPRISE AVENUE~~ BIG PINE KEY FL ~~33043~~

REINSTATEMENT 10-97

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
29420 Enterprise Ave	29420 Enterprise Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Big Pine Key, FL	Big Pine Key, FL.
City & State	City & State
Zip 33043 Country	Zip 33043 Country

4. Date Incorporated or Qualified To Do Business in Florida: 09/20/1995

5. FEI Number: 65-0519937 ☐ 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PSTD	CHARD, BRUCE	75-A ENTERPRISE AVENUE	BIG PINE KEY FL 33043

400080213010A--5
-04/01/97--01069--007
****915.00 ****915.00

3/28/97

8. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name: ROBERT J. MORAITIS, P.A.
Street Address (P.O. Box Number is Not Acceptable): 1310 SOUTHEAST THIRD AVENUE
Suite, Apt. #, Etc.:
City: FORT LAUDERDALE State: FL Zip Code: 33316

CR2E040 (7/96)

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: R J Moraitis Date: 12/5/96

REGISTERED AGENT MUST SIGN ROBERT J. MORAITIS PA

11. 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.)

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: Bruce Chard BRUCE CHARD 3/20/97 305-872-4996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0101662 FP