

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000097690

FILED
Nov 02, 2006
Secretary of State

Entity Name: NAUTICAL OUTFITTERS CORP.

Current Principal Place of Business:

10351 72ND ST N
LARGO, FL 34647

New Principal Place of Business:

Current Mailing Address:

10351 72ND ST N
LARGO, FL 34647

New Mailing Address:

361 NEPTUNE AVENUE
WEST BABYLON, NY 11704 US

FEI Number: 11-3523358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

ROBERT, DEVIN
128 WATERS EDGE
JUPITER, FL 33477 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT DEVINE

11/02/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: GLEN, JAMES
Address: 10351 72ND ST N
City-St-Zip: LARGO, FL 34647

Title: VPD () Delete
Name: STEFANO, JOSEPH D
Address: 10351 72ND ST N
City-St-Zip: LARGO, FL 34647

Title: S () Delete
Name: LAMB, ANTHONY
Address: 10351 72ND ST N
City-St-Zip: LARGO, FL 34647

Title: D () Delete
Name: FLAXMAN, JOAN
Address: 10351 72ND ST N
City-St-Zip: LARGO, FL 34647

Title: D () Delete
Name: DEVINE, ROBERT
Address: 10351 72ND ST N
City-St-Zip: LARGO, FL 34647

Title: D () Delete
Name: PIVAR, STUART
Address: 10351 72ND ST N
City-St-Zip: LARGO, FL 34647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH F. DI STEFANO

VPD

11/02/2006

Electronic Signature of Signing Officer or Director

Date