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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 AUG 14 AM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000029394

1. Corporation Name

MIRAGE M/Y MANAGEMENT CORP.

REINSTATEMENT 98-07

2. Principal Office Address - No P.O. Box #
7091 Orchard Lake Rd., Suite 300

3. Mailing Office Address
7091 Orchard Lake Rd., Suite 300

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida 3/28/1996

City & State
West Bloomfield, MI

City & State
West Bloomfield, MI

5. FEI Number
65-0661916

Applied For
Not Applicable

Zip
48322

Country

Zip
48322

Country

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Incorp Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)
17888 67th Court North

Suite, Apt. #, Etc.

City
Loxahatchee

State
FL

Zip Code
33470

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

David Hill on behalf of Incorp Services, Inc

Date 8/2/07

REGISTERED AGENT MUST SIGN

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

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|-----------|-----------------------------------|--|---------------------------|
| President | W.F. Hubner | 7091 Orchard Lake Rd., Suite 300 | West Bloomfield, MI 48322 |
| Secretary | Glenn A. Barth | 7091 Orchard Lake Rd., Suite 300 | West Bloomfield, MI 48322 |
| | | | |
| | | | |
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10. 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 contained in Chapter 119, 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.

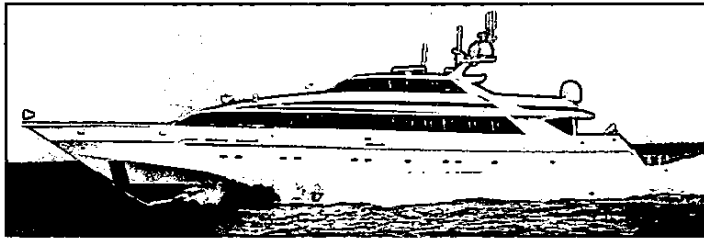
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Glenn A. Barth GLENN A. BARTH 8/2/07

Date

Daytime Phone #



Mirage M/Y Management, Corp.

7091 Orchard Lake Road ▪ Suite 300 ▪ West Bloomfield, Michigan 48322 / 248 ▪ 539 ▪ 3800

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Mirage M/Y Management Corp.
FEIN: 65-0661916

Department of State:

Mirage M/Y Management Corp. (FEIN: 65-0661916) is requesting the reinstatement fee be waived. The corporation did not receive any prior notices regarding annual report filings from the State of Florida.

We are enclosing a check in the amount of \$1,508.75 (\$150.00 annual filing fee x 10 years) plus an additional \$8.75 for a Certificate of Status after processing enclosed Corporation Reinstatement.

Please call (248) 539-3800, extension 266, should you have any questions.

Sincerely,

Daniel R. Wagner, CPA
Mirage M/Y Management Corp.

ABOARD M/Y MIRAGE

Cellular (954) MIRAGE 1,4 ▪ Cellular/Fax (954) 647-2431, 2434
Bahamas Cellular (242) 359-4000 ▪ SatCom 874-1756767 ▪ SatFax 874-1756771
www.mirageyacht.com

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