## 2007 FOR PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 460502** 

FILED Oct 05, 2007 Secretary of State

Entity Nam	ne: MAX'S MA	ARINE, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
213 CORAL ISLAMORA	_ RD DA, FL 33036	3			
Current Mailing Address:			New Mailing Address:		
P O BOX 7 <sup>-</sup> ISLAMORA	1 DA, FL 33036	1			
FEI Number:	59-1549565	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
213 CORAL ISLAMORA	DA, FL 33036	S US	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	E: DANIEL F	COCKERHAM			
	Electron	ic Signature of Registered Age	ent	Date	
		8(2)(b), F.S., the corporation did no Trust Fund Contribution().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () COCKERHAM, I P O BOX 71 ISLAMORADA, I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () COCKERHAM, I P O BOX 261 ISLAMORADA,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL R COCKERHAM **PRES** 10/05/2007