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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VESSEL CASINOS, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

FRANK P. CRIVELLO

(Name of Person)

VESSEL CASINOS, INC.

(Firm/Company)

3408 DOVER ROAD

(Address)

POMPANO BEACH, FL 33062

(City/State and Zip code)

For further information concerning this matter, please call:

FRANK P. CRIVELLO

(Name of Person)

at ( 954 ) 532-0240

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

W04-4835

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

February 4, 2004

FRANK P. CRIVELLO  
VESSEL CASINOS, INC.  
3408 DOVER ROAD  
POMPANO BEACH, FL 33062

SUBJECT: VESSEL CASINOS, INC.  
Ref. Number: W04000004835

We have received your document for VESSEL CASINOS, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 804A00007491

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

VESSEL CASINOS, INC.  
3408 Dover Road  
Pompano Beach, FL 33062

February 16, 2004

**CERTIFIED MAIL**  
**7002 2410 0001 3795 8308**

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

SUBJECT: VESSEL CASINOS, INC.  
Ref. Number: W04000004835

To Whom It May Concern:

Pursuant to your February 4, 2004 correspondence, enclosed please find a certificate of existence for the above referenced entity which clearly reflects Vessel Casinos, Inc. is a valid entity and is in good standing in its home state of Delaware.

To that end, please send written confirmation to the undersigned that Vessel Casinos, Inc. is now authorized to transact business in the State of Florida as a Foreign Corporation.

Sincerely,



Frank P. Crivello  
Director  
Vessel Casinos, Inc.

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. VESSEL CASINOS, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. 20-0614608

(FEI number, if applicable)

4. NOVEMBER 6, 2003

(Date of incorporation)

5. PERPETUEL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 3408 DOVER ROAD, POMPANO BEACH, FL 33062

(Principal office address)

3408 DOVER ROAD, POMPANO BEACH, FL 33062

(Current mailing address)

8. MARINE CHARTER

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: FRANK P. CRIVELLO

Office Address: 3408 DOVER ROAD

POMPANO BEACH

(City)

, Florida 33062

(Zip code)

10. **Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. **Names and business addresses of officers and/or directors:**

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**A. DIRECTORS**

Chairman: ROBERT WEISBERG  
Address: c/o ALCO FINANCIAL, 900 LARKSPUR LANDING CIRCLE, SUITE 230  
LARKSPUR, CA 94939

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: DAVID M. MARKS  
Address: 1818 NORTH FARWELL AVENUE  
MILWAUKEE, WI 53202

Director: SPIRO NAOS  
Address: 1040 CORKWOOD STREET  
HOLLYWOOD, FL 33019

**B. OFFICERS**

President: SPRIO NAOS  
Address: 1040 CORKWOOD STREET  
HOOLYWOOD, FL 33019

Vice President: GREG KARAN  
Address: 4600 NORTH OCEAN DRIVE  
HOLLYWOOD, FL 33019

Secretary: WILLIAM S. FISHER  
Address: 200 WEST SILVER SPRING DRIVE, SUITE 210, GLENDALE, WI 53217

Treasurer: DAVID M. MARKS  
Address: 1818 NORTH FARWELL AVENUE, MILWAUKEE, WI 53202

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. David M Marks  
(Signature of Director or Officer listed in number 12 of the application)

14. DAVID M. MARKS, DIRECTOR AND TREASURER  
(Typed or printed name and capacity of person signing application)

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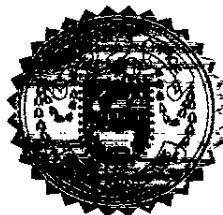
# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VESSEL CASINOS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF FEBRUARY, A.D. 2004.

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DIVISION OF CORPORATIONS  
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*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

3725061 8300

AUTHENTICATION: 2922163

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DATE: 02-10-24