

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

98 NOV 23 PM 1:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F96000005263

1. Corporation Name

SAND & SEAS TRAVEL, INC.

Principal Place of Business

1100 S. FEDERAL HWY  
BOYNTON BEACH FL 33435

Mailing Address

5910 NORTH OCEAN BLVD.  
OCEAN RIDGE FL 33435

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/10/1996

5. FEI Number

88-0367467

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PST	FOSTER, JAMES E	5910 N. OCEAN BLVD	OCEAN RIDGE FL 33435

600002701456--6

-12/03/98--01042--014

\*\*\*\*600.00 \*\*\*\*600.00

8. Name and Address of Current Registered Agent

FOSTER, JAMES E SR  
5910 NORTH OCEAN BOULEVARD  
OCEAN RIDGE FL 33435

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

*James E. Foster*  
REGISTERED AGENT MUST SIGN

Date Nov. 19, 1998

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

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: *JAMES E. FOSTER*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-19-98 5617323304  
Date Daytime Phone #

**TRAVEL MART**  
**YOUR CRUISE PROFESSIONALS**  
1100 S. FEDERAL HWY.  
BOYNTON BEACH, FLORIDA  
33435  
**30 YEARS IN BUSINESS**

561-732-3304  
1-800-458-5827  
FAX 561-732-3306  
E-MAIL  
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sandseas@juno.com  
INTERNET ACCESS  
www.travelmartusa.com

November 19, 1998

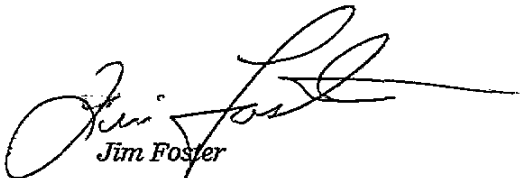
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Doc No. F96000005263

To Whom It May Concern:

*I am at a loss as to what has happened with our prior annual report that was filed with your office on July 1, 1998. According to my records the application and a check for \$550.00 was mailed to you on July 1, 1998. We had no indication that you had not received the information until receipt of the notice of cancellation of our corporation in Florida. I have researched our records and find the check, ck no. 1908 had not cleared our bank nor have we received any mail back. I am sending you another completed form along with a check, ck no. 2119, for \$600.00. If this amount is incorrect please advise and it will be corrected immediately.*

*Have a great day.*

  
Jim Foster