

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JUL 23 AM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000005968

1. Corporation Name

Ocean Equipment and Supply, Inc. of Illinois

2. Principal Office Address - No P.O. Box #

741 S. Rte. 83

Suite, Apt. #, etc.

City & State

Elmhurst, IL

Zip
60126

Country
USA

3. Mailing Office Address

741 S. Rte. 83

Suite, Apt. #, etc.

City & State

Elmhurst, IL

Zip
60126

Country
USA

REINSTATEMENT
GR2E081 (4/07)

4. Date Incorporated or Qualified
To Do Business in Florida

11/13/96

5. FEI Number
364085413

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Randall R Truckenbrodt

Street Address (P.O. Box Number is Not Acceptable)
984 NW 92nd Terrace

Suite, Apt. #, Etc.

City
Plantation

State
FL

Zip Code
33317

☒ 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

Randall R Truckenbrodt
REGISTERED AGENT MUST SIGN

Date 7/6/07

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
P/D	Randall R Truckenbrodt	125 Indianwood Lane	Indian Head Park, IL 60525
D	William A. Irvine	7911 Brookbank Road	Willowbrook, IL 60527

300106583723
07/23/07--01061--001 **\$600.00

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:

Randall R Truckenbrodt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-6-07

Date

630-835-8603

Daytime Phone #