

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 AUG 16 AM 7:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 479977

1. Corporation Name

MIAMI MARITIME ARBITRATION COUNCIL, INC.

500108193525
08/16/07--01029--017 **450.00

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

1825 PONCE DE LEON BLVD.

Suite, Apt. #, etc.

SUITE 412

City & State

CORAL GABLES, FL.

Zip

33134

Country

USA

3. Mailing Office Address

1825 PONCE DE LEON BLVD.

Suite, Apt. #, etc.

SUITE 412

City & State

CORAL GABLES, FL.

Zip

33134

Country

USA

REINSTATEMENT

05-07

4. Date incorporated or Qualified
To Do Business in Florida

10/7/1985

5. FEI Number

59-2594253

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

PHILIP EVERINGHAM

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

1825 PONCE DE LEON BLVD.

Suite, Apt. #, Etc.

SUITE 412

City

CORAL GABLES

State

FL

Zip Code

33134

☒ 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

Philip B. Everingham

REGISTERED AGENT MUST SIGN

Date AUGUST 13, 2007

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
DIRECTOR	KARCHER, MICHAEL	1500 SAN REMO AVENUE - #235	CORAL GABLES, FL. 33146
DIRECTOR	SIOLI, FRANK	201 ALHAMBRA CIRCLE - SUITE 1000 CORAL GABLES, FL. 33134	CORAL GABLES, FL. 33134
DIRECTOR	EVERINGHAM, PHILIP	10655 N.W. 29 TERRACE - 3RD FLOOR MIAMI, FL. 33172	MIAMI, FL. 33172
DIRECTOR	McGOWAN, KITTY	6919 W. BROWARD BLVD. - #225	PLANTATION, FL. 33317
DIRECTOR	CASSIDY, WILLIAM	8370 WEST FLAGLER ST. - SUITE 202	MIAMI, FL. 33144
DIRECTOR	SWANSON, ED	55 ALMERIA AVENUE	CORAL GABLES, FL. 33134

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:

Philip B. Everingham DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/13/07

Date

786 336-7109

Daytime Phone #

#2294