

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J88569

1. Corporation Name
NORTH BROWARD MARINA & BOAT STORAGE, INC.

Principal Place of Business

Mailing Address

580 N. FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33441

FILED

98 JUN 11 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

97-98
aw

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

4. Date Incorporated or Qualified
To Do Business in Florida

8/20/87

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0015989

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐SB 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P, S, T, D	NASTASI, JOSEPH	580 N. FEDERAL HIGHWAY	DEERFIELD BEACH, FL 33441
V	SCHUTTEMAYER, MICHAEL	580 N. FEDERAL HIGHWAY	DEERFIELD BEACH, FL 33441

500002560565--5
-06/16/98-01045-005
****900.00 ****900.00

8. Name and Address of Current Registered Agent

JOSEPH NASTASI
580 N. FEDERAL HIGHWAY
DEERFIELD BEACH, FL 33441

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*Joe Nastasi*

REGISTERED AGENT MUST SIGN

Date 6-9-98

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

Joe Nastasi

JOSEPH NASTASI, PRESIDENT

718-706-7400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20040 (12/96)