

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 182

CORPORATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 APR -6 AM 7:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K27320

1. Corporation Name

PORT LARGO MARINE CANVAS, INC

2. Principal Office Address

701 LAKE CLAY DR. S

Suite, Apt. #, etc.

City & State

LAKE PLACID, FL

Zip

33852

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6/29/88

5. FEI Number

65-0057969

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

JOSEPH A. PEREIRA, JR.

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

10300 SW 72 ST.

Suite, Apt. #, Etc.

470 J

City

MIAMI, FL

State

FL

Zip Code

33173

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

Joseph A. Pereira, Jr.

REGISTERED AGENT MUST SIGN

Date

3/27/03

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	EDWARD OFFER	701 LAKE CLAY DR. S.	LAKE PLACID, FL 33852
S/D	KATHLEEN HARRINGTON	701 LAKE CLAY DR. S.	LAKE PLACID, FL 33852

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 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:

Kathleen Harrington
KATHLEEN HARRINGTON

3/21/03 8634659881

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

3-18-03

282

To whom it may concern:

Our company transferred to Lake Placid, Florida in December of 2001. For some reason, we never received our application for our 2002 Annual Report. Our accountant brought this to our attention last month (Feb. of 2003) and so I called to request an application.

Agent Peterson told me to send this letter explaining that we are not receiving our reports and to send a check for \$300 for 2002 + 2003.

Thank you for your understanding
Kathleen Harrington
Sec/Treas.
Port Harso Marine Canvas