

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 30 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L86411

1. Corporation Name

SEAFARER FISHING PRODUCTS, INC.

Principal Place of Business

Mailing Address

200-30 INDUSTRIAL PARK BLVD.
SEBASTIAN FL 32968

200-30 INDUSTRIAL PARK BLVD.
SEBASTIAN FL 32958



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

07/09/1990

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0207147

Applied For

Not Applicable

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL

Zip

32963

Country

USA

Zip

32963

Country

USA

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)

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
PD	JOHNSTON, ALBERT S IV	6645 110TH PLACE	SEBASTIAN FL 32958
JD	JOHNSTON, ALBERT S III	200-30 INDUSTRIAL PARK BLVD	SEBASTIAN FL
VD	JOHNSTON, ALBERT S III	4350 US Hwy 1	VERO BEACH FL 32967
			600002707526--0
			-12/09/98--01074--024
			***150.00 ***150.00
			12/13

8. Name and Address of Current Registered Agent

MOORE, JOHN E III
756 BEACHLAND BLVD.
VERO BEACH FL 32963

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

[Signature] **SIGNATURE REQUIRED**
REGISTERED AGENT MUST SIGN

Date

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)(l), 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:

[Signature] **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/20/98

561-569-3393

Daytime Phone #

CR2E040 (9/98)

seafarer

FISHING PRODUCTS INC

756 Beachland Blvd Vero Beach FL 32963
561 569 3393 Fax 561 569 3566

20 November 1998

Sandra B. Mortham, Secretary of State
Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Application for Reinstatement

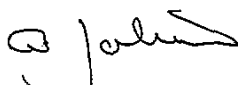
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Dear Ms. Mortham,

This letter is to inform you that we are still an active corporation in the state of Florida. During the summer we moved to a new location and never received 1998 Profit Corporation Annual Report packet. Per our recent phone conversation with your office, this letter is to serve as notice that Seafarer Fishing Products will remain in business. Please note the enclosed check for \$150.00 for Annual Report and Corporate Supplemental fees.

Thank you very much!

Sincerely,


Al Johnston
President