2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Sep 17, 2001 8:00 am DOCUMENT # N 0000000 881 Secretary of State 09-17-2001 90003 035 ****61.25 The Dade-Broward Marine Con 18650 NW 62nd Avenue 33015-6009 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. FILE NOW 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TIME TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition ☐ Change NAME NAME 62nd Avenue STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Addition ☐ Change NAME STREET ADERPESS STREET ADDRESS Same as above CITY-ST-ZIP CITY-ST-7/P MILE Pollock, Edwar mir Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS same as above CITY-ST-ZIP CITY-ST-ZIP ☐ Defete Addition TITLE ☐ Change MAME NAME STREET ADDRESS STREET ADDRESS Same as above CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS same as above CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 97. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Date

ROBERT FLAVELL, P.A.

97886

ROBERT FLAVELL

Julie 11, 2001

Florida Dept. of State Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Re: Reinstatement of The Dade-Broward Marine Corps Reserve Committee Document No. N00000000881

Dear Sirs:

This office represents the above-named corporation, which was administratively dissolved for failure to file an annual report. The prior accountant for the corporation failed to file the required annual reports. We are requesting an abatement of the reinstatement fee. An application for reinstatement is attached hereto, together with a check in the amount of \$61.25.

Should you have any questions, please do not hesitate to contact my office. Thank you for your facilitation of this matter.

Sincerely,

Robert Flavell

Enc.