

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

102

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 12 AM 8:49

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N02000007680

1. Corporation Name

Maritime Security Corporation of Tampa Bay

[Handwritten signature]

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12/12/03--01040--025 **61.25

2. Principal Office Address

3135 Bloomingdale Villas Ct.

Suite, Apt. #, etc.

3. Mailing Office Address

3135 Bloomingdale Villas Ct.

Suite, Apt. #, etc.

City & State

Brandon, FL

City & State

Brandon, FL

Zip

33511

Country

USA

Zip

33511

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

October 8, 2002

5. FEI Number

55 0818809

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

Conrad Palermo

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

3135 Bloomingdale Villas Ct.

Suite, Apt. #, Etc.

City

Brandon

State

FL

Zip Code

33511

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

[Handwritten signature of Conrad Palermo]
REGISTERED AGENT MUST SIGN

Date December 5, 2003

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/C/D	Conrad Palermo	3135 Bloomingdale Villas Ct.	Brandon, FL 33511
V/S/D	David K. Lowe	13024 Waterford Run Drive	Riverview, FL 33569
V/T/D	Cynthia Hawkins	2807 Springdell Circle	Valrico, FL 33594

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)(f), 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:

[Handwritten signature of David K. Lowe]

David K. Lowe

12/5/03

813-431-9378

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR-2003 (1/02)



2032

MARITIME SECURITY CORPORATION OF TAMPA BAY

December 5, 2003

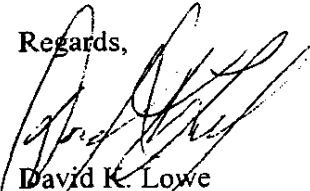
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To whom it may concern:

I have recently been appointed as Vice-President and to the Board of Directors of our non-profit corporation to take over the daily operations. Reviewing our status I have discovered that our corporation has been administratively dissolved for non-payment of the annual fee on September 19, 2003, **Document Number: N02000007680**. After an exhaustive search in our files I cannot find the renewal/bill anywhere and would like to request a waiver of the reinstatement fee of \$175.00. Included in this letter are the Corporation Reinstatement Form and a check for \$ 61.25.

Please advise me if there are any other actions necessary for us to file the necessary paperwork with your office.

Regards,



David K. Lowe
Vice-President, Operations
Maritime Security Corporation
800-410-2009

3135 Bloomingdale Villas Court
Brandon, FL 33511

813-431-9378
info@marseco.org