PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Katherine Harris FILED FOR Secretary of State REINSTATEMENT 00 FEB -3 AM 11: 43 DIVISION OF CORPORATIONS DOCUMENT# N 21393 SECRETARY OF STATE TALEAPHISSEE, FLORIDA 1. Corporation Name MARINE LIFE PRESERVATION SOCIETY, INC. Principal Place of Business Mailing Address 501 BRICKELL KEY DRIVE -501 BRICKELL KEY DRIVE SUITE 208 -SUITE 208 MIAMI. FL 33131 MIAMI, FL 33131 **NSTATEMENT** 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 Date Incorporated or Qualified 4820 N.E. 26 AVENUE 4820 N.E. 26 AVENUE To Do Business in Florida 06/30/87 Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 5. FEI Number City & State FORT_LAUDERDALE, City & State 59-2833695 Not Applicable FORT LAUDERDALE, \$8.75 Additional Fee regulre Zip 333<u>08</u> Country Country Zip 33308 CERTIFICATE OF STATUS DESIRED 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) Name of Officers Street Address of Each City / State / Zip Title(s) and/or Directors Officer and/or Director (Do NOT Use Post Office Box Numbers) GREGG BOSSART 406 ALCAZAR AVE P/D MIAMI, FL33134 LYNDA GREEN 800 CLAUGHTON ISLAND DR VP/D 1705 33131 MIAMI, FL 901 N.W. 14TH CT THEODORA LONG S/D MIAMI, FL 33125 D. BRENT TINGLER 4820 N.E. 26TH AVENUE T/D FORT LAUDERDALE, FL 33308 800003130408---4 -02/10/00--01007--025 ****542.50 ****542.50 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent BRENT TINGLER TEO BABUN Street Address (P.O. Box Number is Not Acceptable) 501 BRICKELL KEY DRIVE 4820 N.E. 26TH AVENUE Suite, Apt. #, Etc. SUITE 208 State Zip Code MIAMI, FLORIDA — 33131 Fl 33308 FORT LAUDERDALE 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 Date JANUARY 27, 2000 REGISTERED AGENT MUST SIGN This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. No x Yes ಪ್ರಶ. 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

/ filling 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 name 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.

KE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

D. BRENT TINGLER as TREASURER/DIRECTOR 01/27/00 954-491-3080

Daytime Phone #