
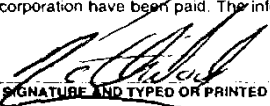


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b> (1996-1999)		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		99 MAY 12 AM 10:36 FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT #</b> N95000005354					
1. Corporation Name <b>Marine Environmental Agency Corp.</b> <div style="text-align: center; font-size: 1.2em; margin-top: 10px;">W99000010642</div>					
Principal Place of Business		Mailing Address			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.		<b>% Kenneth McClintock</b> <b>Miami Beach Yachting Center</b> <b>Yacht G-5, 300 Alton</b> <b>Miami Beach, FL 33139</b>			
		<b>REINSTATEMENT</b> <span style="font-size: 1.5em; margin-left: 10px;">11-99</span>			
		DO NOT WRITE IN THIS SPACE			
		4. Date Incorporated or Qualified To Do Business in Florida <b>11/13/95</b>			
2. New Principal Office Address, If Applicable		3. New Mailing Address, If Applicable		5. FEI Number	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		N/A	
City & State		City & State		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> <b>\$8.75 Additional Fee required for a Certificate of Status</b>	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
1	2	3	4		
DPST	McClintock, Kenneth L	Yacht G-5, 300 Alton	Miami Beach, FL 33139		
D	McClintock, Glenna A	Yacht G-5, 300 Alton	Miami Beach, FL 33139		
D	Shoff, Megan E	8409 Forest Hills Blvd #307	Coral Springs, FL 33065		
			000002886020--3 -05/25/99--01073--013 *****420.00 *****420.00		
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
			Name		
			<b>McClintock, Kenneth L (MIAMI BEACH MARINA)</b>		
			Street Address (P.O. Box Number is Not Acceptable)		
			<b>300 Alton, Yacht G-5</b>		
			Suite, Apt. #, Etc		
			City		
			<b>Miami Beach</b>		
			State	Zip Code	
			FL	33139	
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		Date <b>4/05/99</b> REGISTERED AGENT MUST SIGN			
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
<b>SIGNATURE:</b> 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					

CP2E040 (12/95)