## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE  Jim Smith  Secretary of State  DIVISION OF CORPORATIONS	FILED Jan 21, 2003 8:00 A.M. Secretary of State
DOCUMENT # PÓ00000	)50725	
DNS YACHT SERVICE, INC	C,	
		200010390052 01/21/0301072004 **159.00
2. Principal Office Address  12042 SW 1 <sup>ST</sup> ST  Suite, Apt. #, etc.	3. Mailing Office Address    12042 SW   1 <sup>S+</sup> ST    Suite, Apt. #, etc.	
e e e e e e e e e e e e e e e e e e e		4. Date Incorporated or Qualified To Do Business in Florida 05/18/2000
City & State  CORAL SPRINGS, FL	Coral Springs, FL	<b>5.</b> FEI Number Applied For Not Applicable
Zip Country 33071 - 8009	Zip Country 33071 -8009	CERTIFICATE OF STATUS DESIRED   S8.75 Additional Fee required for a Certificate of Status
	7. Name and Address of Current Re	gistered Agent
Name JOHN SBROLLA		
Street Address (P.O. Box Number is Not Acceptable)  12042 SW 1 <sup>ST</sup> ST		
Suite, Apt. #, Etc.		
City CORAL SPRINGS		State Zip Code FL 330 71 - 8009
8. I, being appointed the registered agent of the at	bove named corporation, am familiar with and accept	the obligations of section 607.0505 or 617.0503, F.S.
Signature of Registered Agent	ZULOULU REGISTERED AGENT MUST SIGN	the obligations of section 607.0505 or 617.0503, F.S.  Date 10/21/02
9. Names and Street Addresses of Each Officer a	and/or Director (Florida nonprofit corporations must lis	t at least 3 directors)
Titles Name of Officers and/or Directo	Street Address of Officer and/or Di	
T/D/P JOHN-SBROLLA	12042 SW 15t	- ST
S/V DAVID YAP	1531 RIALTI	D OR BOYNTON BEACH, FL 33436
this reinstatement application, the reason for dis owed by the corporation have been paid and the	ssolution has been eliminated, the corporate name sa	n as provided for in chapter 607 or 617, F.S. I further certify that when filing tisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees y for an exemption under section 119.07(3)(i), F.S. The information indicated under oath.
SIGNATURE: SIGNATURE AND TYPED OR P	JOHN SBROWA PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	10   21   0 2 954 614 31 97  Date Daytime Phone #

## DNS Yacht Services, Inc.

John Sbrolla President 12042 SW 1<sup>st</sup> Street Coral Springs, FL 33071

January 16, 2003

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Dear Department of State:

Due to address change, DNS Yacht Services did not receive the prior Uniform Business Report notices. DNS did not have any employees for the 2000-2001 calendar year.

Sincerely,

John Sbrolla