

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 DEC 24 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000067021

1. Corporation Name

THREE BROTHERS FISHING COMPANY, INC.

2. Principal Office Address

5009 Gulf Boulevard

Suite, Apt. #, etc.

City & State

St. Pete Beach, FL

Zip

33706

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

600004765466--4

-01/10/02--01077--010

****150.00 ****150.00

7. Name and Address of Current Registered Agent

Name

Joel D. Broida

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

605 75th Avenue

Suite, Apt. #, Etc.

City

St. Pete Beach, FL

State
FL

Zip Code
33706

LS

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

Joel D. Broida

REGISTERED AGENT MUST SIGN

Date 12/19/01

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
Pres/ Dir	Marc S. Shen	275 126th Avenue E.	Treasure Island, FL 33706
V.P.	Matt Taylor	5009 Gulf Blvd.	St. Pete Beach, FL 33706
Sec	George Calomiris	5009 Gulf Blvd.	St. Pete Beach, FL 33706

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)(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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marc S. Shen

12/19/01

Date

(727) 244-4976

Daytime Phone #

CR2E081 (9/00)

LAW OFFICES OF
Broida and McKinney, P.A.
605 - 75th AVENUE
POST OFFICE BOX 66714
ST. PETE BEACH, FLORIDA 33706

2018

JOEL D. BROIDA
S. KEITH MCKINNEY, JR.

(727) 367-1941
(727) 360-0691
FAX: (727) 367-6128

December 19, 2001

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

RE: Three Brothers Fishing Company, Inc.
Reinstatement

TO WHOM IT MAY CONCERN:

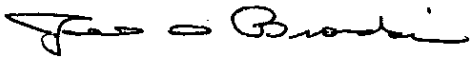
The undersigned represents Three Brothers Fishing Company, Inc., and Mr. Marc Shen, its President and Principal Stockholder. Recently Mr. Shen was advised that the corporation had been administratively dissolved for its failure to pay annual fees.

I know Mr. Shen well. No notice of payment was provided to him at his address or the obligation would have been properly discharged by payment. I am appreciative of the fact that these fees are to be paid in a timely manner. However, if the entity is not properly billed, it is unrealistic to anticipate payment.

I am asking for understanding. Enclosed is my trust account check for \$150.00, along with the Application for Reinstatement. Please accept this and waive the extremely harsh penalty for reinstatement, which in this instance should not be applicable.

Thank you for your understanding and your cooperation.

Very truly yours,



Joel D. Broida
JDB/cm
Enclosures