

**2006 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 05, 2006  
Secretary of State**

DOCUMENT# P00000104746

Entity Name: SUMMER WIND YACHT CHARTERS, INC.

**Current Principal Place of Business:**

3012 EAST COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

3012 EAST COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

FEI Number: 65-1053417      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TALCHIK, MATTHEW P  
3012 EAST COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33308      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MATTHEW TALCHIK

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: TALCHIK, MATTHEW P  
Address: 3012 E.COMMERCIAL BLVD  
City-St-Zip: FT.LAUDERDALE, FL 33308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW TALCHIK

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PSTD

10/05/2006

\_\_\_\_\_  
Date