

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 29 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000114599

1. Corporation Name

HAWKEYE-FLETCHER MARINE INC.

Principal Place of Business

545
150TH AVENUE NORTH
ST. PETERSBURG FL 33711

Mailing Address

545
150TH AVENUE NORTH
ST. PETERSBURG FL 33711



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/11/2000

5. FEI Number

59-3694506

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
S	HAWKINS, ANDREA J	4288 46TH AVENUE SOUTH 4288	SAINT PETERSBURG FL 33711
VP	HAWKINS, GRAHAM	125 KINGS MOORINGS, 46TH AVENUE 4288 46TH AVENUE SOUTH	SAINT PETERSBURG FL 33711
T	HAWKINS, CLARRY	4288 46TH AVENUE SOUTH	SAINT PETERSBURG FL 33711

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10/29/02--01038--015 **150.00

8. Name and Address of Current Registered Agent

HAWKINS, MARK
4288 46TH AVE. SOUTH
ST. PETERSBURG FL 33711

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 10/24/02

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/24/02

Date

727-320-0052

Daytime Phone #

CR2E040 (8/02)

Hawkeye-Fletcher
Marine, Inc

545 150th Avenue North
Madeira Beach,
St Petersburg, FL 33708
Tel: 727 320 0052
Fax: 727 320 0062

October 24, 2002

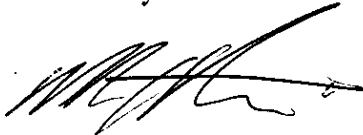
Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee
FL 32314-6327

Dear Sirs

Please accept this letter as notice that we were not in receipt of the 2 previous UBR notices.

I enclose the appropriate filing fee for a for-profit corporation of \$150.00.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Mark Hawkins', with a stylized flourish at the end.

Mark Hawkins
President