PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JAN 27 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000039360

1. Corporation Name
MARINE ENTERPRISES INC.
[redacted]

REINSTATEMENT 02-05
MRD

2. Principal Office Address	**3.** Mailing Office Address
5450 S.W. 5th Street	c/o Eugene H. Leonard 12567 Northeast 7th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Plantation	City & State: North Miami
Zip: 33317 Country: USA	Zip: 33161 Country: USA

4. Date Incorporated or Qualified – To Do Business in Florida: 04/18/2001

5. FEI Number: 65-1103607 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Richard B. Cogswell
Street Address (P.O. Box Number is Not Acceptable): 5450 S.W. 5th Street
Suite, Apt. #, Etc.:
City: Plantation, FL State: FL Zip Code: 33317

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: Richard B. Cogswell Date: 01/25/2005
REGISTERED AGENT MUST SIGN

CR2E081 (01/05)

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
P/T	RICHARD B. COGSWELL	5450 S.W. 5th STREET	PLANTATION, FL 33317
VP/S	MARTHANNA COGSWELL	5450 S.W. 5th STREET	PLANTATION, FL 33317

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02/10/05--01002--012 **608.75

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: Richard B. Cogswell Richard B. Cogswell 01/25/2005 (954)610-4698
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #