PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P01000064447 DOCUMENT

1. Corporation Name

STAR DATE CHARTERS, INC.

Principal Place of Business

Mailing Address

RICKENBACKER MARINA

RICKENBACKER MARINA

FILED

03 OCT 21 AMII: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA,

If above addresses are incorred in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, if Applicable 3. New Mailing Office Address, if Applicable 3. New Mailing Office Address, if Applicable 4. Date Incorporated or Qualified 10.02 Sustances in Epridia. 6. CINY & State City & State City & State City & State Country C	3301 RICKENBACKER CAUSEWAY, #A-48 3301 RICKEN KEY BISCAYNE FL 33149 KEY BISCAYN			BACKER CAUSEWAY. #A-48 NE FL 33149		BEINSTATEMEN 07		
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Zip Country Country Country Country Country CERTIFICATE OF STATUS DESIRED Country 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Title(s) 2 Name of Officers and/or Directors 3 Street Address of Each Officer and/or Director 4 City / State / Zip P PAUL, FREDERICK R 3301 RICKENBACKER CAUSEWAY, A-48 KEY BISCAYNE FL 33149 200023972952 10/21/0301080012 ***750.00 Name PAUL, FREDERICK R 3301 RICKENBACKER CAUSEWAY **A48 KEY BISCAYNE FL 33149 Street Address of New Registered Agent Name Street Address of New Registered Agent Street Address (P ** Bbx Number is Not Acceptable) Sulte, Apt. #, Etcl City State Zip Code FL Zip Code	City & State		City & State				65-111/519	Not Applicable
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PAUL, FREDERICK R 3301 RICKENBACKER CAUSEWAY #A-48 KEY BISCAYNE FL 33149 PAUL State City State Zip Code FL City Cit	Title(s)	(S) and/or Directors		Officer and/or Director				
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PAUL, FREDERICK R 3301 RICKENBACKER CAUSEWAY #A-48 KEY BISCAYNE FL 33149 Street Address (P.& Bbx Nimber is Not Acceptable) Suite, Apt. #, Etcl City State Zip Code	8. Name and Address of Current Registered Agent					9. Name and	Address of New Registere	ed Agent
3301 RICKENBACKER CAUSEWAY #A-48 KEY BISCAYNE FL 33149 City State Zip Code FL					Name	111		
#A-48 KEY BISCAYNE FL 33149 City Suite, Apt. #, Etol City State FL Zip Code	•				Street Address (P.G. Box Number	is Not Acceptable)	
KEY BISCAYNE FL 33149 City State Zip Code FL					Suite, Apt. #. Etc	/ / //		<u>-</u>
Silv J SEL POSS								
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.	NET E	NOUMINE FE 30 149			City			ate Zip Code
	10. I, being	g appointed the registered agent of the a	bove named corpo	oration, am far	miliar with and accept the o	obligations of Sect	tion 607.0505, F.S. or 617.0	505, F.S.

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 filling 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 of Registered Agent