

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

2005 JUL 25 AM 8:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000077178  
1. Corporation Name WORLDWIDE MEGAYNMENTS.  
INC.

2. Principal Office Address  
3000 N.E. 30<sup>th</sup> PLACE.

Suite, Apt. #, etc.

403

City & State

FT. LAUDERDALE FLA.

Zip

33306.

Country

BROWARD.

3. Mailing Office Address

SAME.

Suite, Apt. #, etc.

403.

City & State

FT. LAUDERDALE FLA.

Zip

33306.

Country

BROWARD.

REINSTATEMENT

FEI NO. 810575678

4. Date Incorporated or Qualified  
To Do Business in Florida

7/13/02

5. FEI Number

PO1000077178.

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

CRPT. GARY J. WILLIAMS.

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

3000 N.E. 30<sup>th</sup> PLACE.

Suite, Apt. #, Etc.

403

City

FT. LAUDERDALE

State

FL

Zip Code

33306.

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

Gary J. Williams  
REGISTERED AGENT MUST SIGN

Date JULY 20, 2005.

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.	GARY J. WILLIAMS.	3000 N.E. 30 <sup>th</sup> PLACE.	FT. LAUDERDALE, FLA. 33306.

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:

Gary J. Williams  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/20/05  
Date

954-565-8745  
Daytime Phone #

212



July 20<sup>th</sup> 2005

DEPARTMENT OF STATE

SUBJECT: WORLDWIDE MEGAYACHTS INC.

REFERENCE NO. P01000077178

ATTENTION: ANDY DUNLAP Documentation Specialist Supervisor

Dear Mr. Dunlap,

In reference to our conversation on July 12<sup>th</sup> and your letter of the 13<sup>th</sup> of July (letter no. 405A00046237).

Enclosed you will find your completed reinstatement form and a check for \$450.00.

Since the office I was going to occupy was a floating house (boat barge type) was seriously damaged, all postal mail correspondence was lost and therefore I never received the necessary filing notices from your department. I apologize for this confusion. I would appreciate it if you would immediately reinstate WorldWide MegaYachts, Inc. and take note of my new mailing address.

WorldWide MegaYachts, Inc.  
3000 NE 30<sup>th</sup> Place Suite #403  
Fort Lauderdale, Florida 33306

Respectfully Submitted,

A handwritten signature in black ink, which appears to read "Gary J. Williams". The signature is fluid and cursive.

Captain Gary J. Williams  
President