

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 SEP -2 AM 8:24

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P01000077725

1. Corporation Name

O'RAFF'S BY THE SEA, INC.

REINSTATEMENT 02-03

100022701541  
09/02/03--01056--009 \*\*900.00

2. Principal Office Address

757 Highway 98 E.

Suite, Apt. #, etc.

Suite 7

City & State

Destin, FL

Zip

32541

Country

U.S.

3. Mailing Office Address

757 Highway 98 E.

Suite, Apt. #, etc.

Suite 7

City & State

Destin, FL

Zip

32541

Country

U.S.

4. Date Incorporated or Qualified  
To Do Business in Florida

8/8/2001

5. FEI Number

36-4462341

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

NICHOLAS OSBERG

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

757 Highway 98 E.

Suite, Apt. #, Etc.

Suite 7

City

Destin, FL

State

FL

Zip Code

32541

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

*Nicholas Osberg*  
REGISTERED AGENT MUST SIGN

Date

8/28/03

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, D	Nicholas Osberg	757 Highway 98 E., Suite 7	Destin, FL 32541
D	Elisa Osberg	757 Highway 98 E., Suite 7	Destin, FL 32541
VP, D	Anthony Mamuscia	757 Highway 98 E., Suite 7	Destin, FL 32541

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:

*Nicholas F. Osberg*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8/28/03

Daytime Phone #

850-650-5253