PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000033298

1. Corporation Name

SPEED & SPORT MARINE, INC.

Principal Place of Business

Mailing Address

284 SW 33RD COURT FT LAUDERDALE FL 33315 284 SW 33RD COURT FT LAUDERDALE FL 33315 REINSTATEMENT 03

SECRETARY OF STATE DIVISION OF CORPORATIONS

03 OCT 14 AM 8: 00

If above addresses are incorrect in any way, line through incorrect information and enter correction below.					100023794191 10/14/03-01060-032 **150.00 MR			
	rincipal Office Address, If Applicable		3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 03/27/2002		
Suite, Apt.	#, etc.	Suite, Apt. #	, etc.		5. FEI Numbe			
City & Sta	te .	City & State	7 77		03-0	03-0417000 Not Applicable		
Zip	Country	Zip	Cour	itry	6. CERTIFICATI	E OF STATUS DESIRED 🔲	\$8.75 Additional Fee required for a Certificate of Status	
7. Names	and Street Addresses of Each Officer an	d/or Director (Flo	orida nonprofit corpo	rations must list at lea	ast 3 directors)			
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip		
DPST	DESJARDIN, STEPHEN		284 SW 33RD COURT			FT LAUDERDALE FL 33315		
								
	8 Name and Address of Curren	t Bogistored As	ant .		O Nama and	Addross of New Conister	ad Agent	
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent Name				
HAYDEN, STEPHEN				Street Address (P.O. Box Number is Not Acceptable)				
	E 48 STREET		Street Address (1.13. Box Hallison is Not Acceptable)					
POMP	ANO BEACH FL 33064		Suite, Apt. #, Etc.					
				City			tate Zip Code	
10. I, bein Signature Registered	g appointed the registered agent of the at	ydl	oration, am familiar	with and accept the ol	bligations of Sect	Date		
			SENT MUST SIGN					
11 I certify	that I am an officer or director or the reci	eiver or trustee ei	mnowered to execut	e this application as n	rovided for in cha	apter 607 or 617 F.S. Lfurt	her certify that when filing	

1, 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

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Data Da

FLORIDA DEPT. OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSIDE, P. 32314 RE SPERD + SPORT MARINE, INC. 784 SW 33RD CT. FT. LAVOLDOUG FLBBS DOCUMENT # PO 2000033298 PLUESK BK DOVISLED THET SPEND & SPORT MARINE, TIC HOS NEWER RECEIVED A REPORT RESURING A. FEX FOR \$ 150,00 THOT WAS DUE ON ESTATED MA/31, OR SEPT. 30, 2003 WE DO NOTFERD WY SHALD BE PENDIZED Thomas FOR NOT RUCKIUNG THIS DOCUMENT PORODO 33298 WE DRE ENCLOSING OWN CHECK FOR 150, OO WHICH WE WOULD OWE HAO WE RECEIVED THIS FORM, WHEN WE SHOULD HOVE THOM-TOU) STEPHEN DESTAGOIN