PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		LENOL NEND I	TEE INOTINO	THORO DEFORE	- -		FILED		
CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		03 NOV -3 PH I2: 38  SECRETARY OF STATE TALLAHASSEE, FLORIDA					
DOCU		# P02000064	<b>1765</b>				TALLAHASSEE.	FLORIDA	
YACHTLINK ENGINEERING, INC.									
					REIN		- VEN	03	
	al Office Address	3	1	3. Mailing Office Address		/03	01032014	**150.00	
PO BOX 7078			PO BOX 7078		_				
Suite, Apt. #	#, etc. 		Suite, Apt. #, etc.		4. Date Incom	orated or	Qualified 500000		
City & State	<u> </u>		City & State		To Do Busi			2	
FT. LAUDERDALE, FL			FT. LAUDERDALE, FL		<b>5.</b> FEI Numbe		<u>ا</u> 2	Applied For Not Applicable	
Zip 33338		Country USA	Zip 33338-7078	Country	6.		\$8.75 Ad	ditional Fee required ertificate of Status	
			7. Name ar	nd Address of Current Registe	red Agent			<del></del>	
	Name DANIEL PHILLIP KELLY  Street Address (P.O. Box Number is Not Acceptable) 311 NE 45TH STREET								
	Suite, Apt. #, Etc.							ĺ	
	City FT.		State FL	Zip Code 33334					
8. I, being Signature o Registered	f	3/12	ve pamed corporation, a	am familiar with and accept the o	obligations of section		05 or 617.0503, F.S.	CRZE081 (10/02)	
9. Names	and Street Add	resses of Each Officer and	d/or Director (Florida nor	nprofit corporations must list at le	east 3 directors)				
Titles	s Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip		
Р	DANIEL P. KELLY		311	311 NE 45TH STREET		FT. LAUDERDALE, FL 33334			
:	<u> </u>								
							····		
this rei	nstatement appl by the corporation	ication, the reason for diss in have been paid and the i	olution has been elimina names of individuals list	ed to execute this application as ated, the corporate name satisfie ed on this form do not qualify for same legal effect as if made under the control of the	s the requirements an exemption und	of section	n 607.0401 or 617.0401, F	.S., that all fees	
GICNA:	TUDE: 🏕	3/1-			1	<b>の</b> -つ	8-02 964	771-2489	
SIGNA	TURE: 🔏	NATURE AND TYPED OR PRI	INTED NAME OF SIGNING	OFFICER OR DIRECTOR	<b>*</b> /	Date	8-03 954 Daytime P	hone #	

D

## SMITH, TODD, McENTEE & COMPANY, LLP

CERTIFIED PUBLIC ACCOUNTANTS

**MEMBERS** 

PALM CITY PROFESSIONAL BUILDING SUITE 203

TELEPHONE 772-288-3797 FACSIMILE 772-288-3723

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BROWARD LINE 954-491-1253

FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

palmcity@stmccpa.com

TOLL FREE 800-737-0639

October 28, 2003

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re:

Document # P02000064765 Yachtlink Engineering, Inc.

Dear Sir or Madam:

Following a conversation our client, Mr. Kelly, President of Yachtlink Engineering, Inc., had with your office last week, enclosed please find the following:

- 1. Original completed and signed Corporate Reinstatement.
- 2. Check for \$150 made payable to Department of State.

In the past, Mr. Kelly has complied with the Annual Report filing requirements for his business. Mr. Kelly moved his business at the end of 2002 and never received the Annual Report form for completion. Mr. Kelly became aware of the situation several weeks ago and contacted us immediately for advice.

Yachtlink Engineering, Inc. is, at this time, requesting an abatement of the reinstatement fee since there was no intentional disregard of the filing requirements or willful intent to file the Annual Report late.

Thank you for your consideration of this matter.

Sincerely

Daniel F. McEntee

Authorized Signature:

Daniel P. Kelly, President