

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 17 PM 4:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000106330

1. Corporation Name

OCEAN BLUE VENTURES, INC.

REINSTATEMENT 03



800023891228  
10/17/03--01033--007 \*\*\*150.00

Principal Place of Business

8336 DIAMOND COVE CIRCLE  
ORLANDO FL 32836

Mailing Address

8336 DIAMOND COVE CIRCLE  
ORLANDO FL 32836

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/02/2002

5. FEI Number

52-2383483

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PDT	MONTELEONE, MARIO J	8336 DIAMOND COVE CIRCLE	ORLANDO FL 32836
VS	MONTELEONE, LYNN K	8336 DIAMOND COVE CIRCLE	ORLANDO FL 32836

8. Name and Address of Current Registered Agent

MONTELEONE, MARIO J  
8336 DIAMOND COVE CIRCLE  
ORLANDO FL 32836

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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.

Signature of  
Registered Agent

SIGNATURE

REGISTERED AGENT MUST SIGN

Date

10/14/03

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 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:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/14/03

Daytime Phone #

407 468 9707

CR2E040 (7/03)

16-  
Ocean Blue Ventures Inc.

8336 Diamond Cove Circle

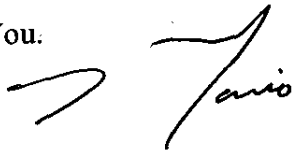
Orlando FL, 32836

(407) 230-7813

Florida Dept. of State:

I am writing this letter for reinstatement as well as enclosing the appropriate UBR filing fee. I did not receive any UBR notice and would appreciate your attention to this matter.  
Tax ID # = 52-2383483

Thank You.

A handwritten signature in black ink, appearing to read "Mario", with a stylized flourish above it.

Mario MonteLeone  
President