

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 MAY 25 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P03000065483**

1. Corporation Name

Richman Marine Inc.

W06 - 21713

2. Principal Office Address

1406 SE 17 St

Suite, Apt. #, etc.

3. Mailing Office Address

1406 SE 17 St

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33316

Country

Broward

Zip

33316

Country

Broward

4. Date Incorporated or Qualified
To Do Business in Florida

6/12/2003

5. FEI Number

81-0618129

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

Michael Hastie

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

1406 Southeast 17 Street

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State

FL

Zip Code

33316

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

Date

REGISTERED AGENT MUST SIGN

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	Michael Hastie	1406 SE 17 St	Ft. Lauderdale, FL 33316

200075873462
05/06/06--01015--013 **450.00

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-06

Date

Daytime Phone #

954-462-0050

2072

RICHMAN MARINE INC.

1406 Southeast 17 Street
Ft. Lauderdale, Fl 33316
Phone: 954-462-0050
Fax: 954-462-0070

Date: April 27, 2006

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

Document# P03000065483

To Whom It May Concern:

We were told by our new accountants that our corporation has been dissolved due to not filing our annual report. We never received any annual report notice to do this. We moved in 2004 our new address is;

Richman Marine
1406 Southeast 17 Street
Ft. Lauderdale, FL 33316

Please waive the reinstatement fee.

Sincerely,

Michael Hastie

