

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 NOV 21 PH 5:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000074997

1. Corporation Name

Shoreline Electronics, Inc

2. Principal Office Address

360 Central Ave

Suite, Apt. #, etc.

#1410

City & State

St Petersburg, FL

Zip

33701-3838

Country

Pinellas

3. Mailing Office Address

360 Central Ave

Suite, Apt. #, etc.

#1410

City & State

St Petersburg, FL

Zip

33701-3838

Country

Pinellas

REINSTATEMENT # 01051 810 ~~550~~

**4. Date Incorporated or Qualified
To Do Business in Florida**

07/02/2003

5. FEI Number

20-0110608

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

Joel P. Yanchuck, Esq

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

5453 Central Ave

Suite, Apt. #, Etc.

City

St Petersburg

State
FL

Zip Code
33710

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

REGISTERED AGENT MUST SIGN

Date

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	Joel P. Yanchuck, Esq	360 Central Ave #1410	St Petersburg, FL 33701-3838
VP	Adam D. Yanchuck	360 Central Ave #1410	St Petersburg, FL 33701-3838
S	Raymond Schneider	360 Central Ave #1410	St Petersburg, FL 33701-3838

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: Joel P. Yanchuck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/18/05 727-822-6313

Date

Daytime Phone #

B. Mitchell NOV 22 2005