


# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000050502		
1. Entity Name PALM BEACH MARINE SERVICES, INC.		

FILED  
06 JUN 23 PM 12:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03-31-05 90036 015 \$150.00



Principal Place of Business 500 N.E. SPANISH RIVER BLVD., #28A BOCA RATON, FL 33431	Mailing Address 500 N.E. SPANISH RIVER BLVD., #28A BOCA RATON, FL 33431
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2. Principal Place of Business 1901 MARINA ISLEWAY Suite, Apt. #, etc. 401 City & State Jupiter FL Zip 33477 Country USA	3. Mailing Address 1901 MARINA ISLEWAY Suite, Apt. #, etc. 401 City & State Jupiter FL Zip 33477 Country USA
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06082006 REIN-P CR2E098 (11/05)	65-06
4. FEI Number 260082122	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SCHOLEMAN, JAMES 500 N.E. SPANISH RIVER BLVD., #28A BOCA RATON, FL 33431	
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7. Name and Address of New Registered Agent Name SCHLOEMAN JAMES Street Address (P.O. Box Number is Not Acceptable) 1901 MARINA ISLEWAY APT 401 City Jupiter FL Zip Code 33477	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE Schloeman, JAMES Signature, typed or printed name of registered agent and title if applicable.	DATE 6/18/06 (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$900.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOLEMAN, JAMES 500 N.E. SPANISH RIVER BLVD., #28A BOCA RATON, FL 33431 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR 6/27 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Schloeman, JAMES 1901 MARINA ISLEWAY APT 401 Jupiter FL 33477 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500076673275 06/28/06--01013--008 **150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: Schloeman, JAMES SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE 6/18/06 Daytime Phone # 561-632-1004

Palm Beach Marine Serv. Inc  
1901 Marine Isle Way #401  
Jupiter, Fl. 33477

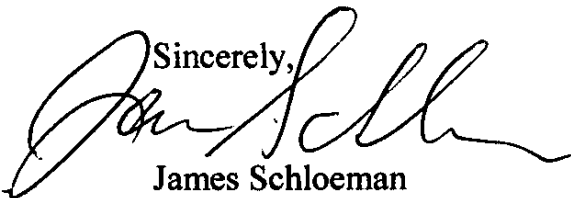
To Whom It May Concern,

After speaking to a representative in your office I was told that my Corporation was not active. I was told that the check for 2005 was not received and and my corporation needed to be reinstated. After some investigating we found out that my correction letter was sent to the wrong address.

I have received the form and have filled it out and it will be enclosed. Also I have enclosed proof of last years payment and also a check for 2006 for the amount of \$150.

I appreciate your cooperation with this matter. Please feel free to contact me with any further questions so this will not occur in the future.

Sincerely,



James Schloeman  
561 632-1004

TAX I.D # 268002122  
DOC # P 04000050502