PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
07 JUL 12 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000073733

1. Corporation Name

MARINE BUSINESS MANAGEMENT, INC.

CR2E081(1/07)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
9002 W. Hillsborough Avenue	9002 W. Hillsborough Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa, Florida	City & State: Tampa, Florida
Zip: 33615 / Country	Zip: 33615 / Country

4. Date Incorporated or Qualified To Do Business in Florida: 05/05/2004

5. FEI Number: 55-0867035 ☐ 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: SPIEGEL & UTRERA, P.A.

Street Address (P.O. Box Number is Not Acceptable): 1840 Southwest 22nd Street

Suite, Apt. #, Etc.: 4th Floor

City: Miami | State: FL | Zip Code: 33145

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: SPIEGEL & UTRERA, P.A. By: _____
Natalia Utrera, Vice President
REGISTERED AGENT MUST SIGN

Date: 6-25-07

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
PTD	McNamara, Kevin J.	9002 W. Hillsborough Avenue	Tampa, Florida 33615
VSD	McNamara, Deanne	9002 W. Hillsborough Avenue	Tampa, Florida 33615

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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: Kevin J. McNamara — Kevin J. McNamara
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 6-25-07

Daytime Phone #

MARINE BUSINESS MANAGEMENT
9002 WEST HILLSBOROUGH AVENUE
TAMPA, FLORIDA 33615
(813) 855-1672 FAX: (813) 884-1368

To: Florida State Department of Division Corporations

FROM: Marine Business Management

RE: #P04000073733

To Whom It May Concern:

Please be advised that neither the corporation nor any of its officers or directors received any notification from the state of Florida Division of Corporations requesting additional information and advisory that the corporation would be dissolved in 2005.

Sincerely,

Deanne M. McNamara
Vice President
Marine Business Management