


## 2005 FOR PROFIT CORPORATION REINSTATEMENT


|   |   |
|---|---|
| <b>DOCUMENT # P04000074351</b><br>1. Entity Name<br>GLOBAL UNDERWATER EXPLORERS PRODUCTIONS, INC. |  |
|---|---|

FILED  
 05 NOV 14 AM 10:37  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

|  |  |
|--|--|
| Principal Place of Business<br>15 S. MAIN STREET<br>HIGH SPRINGS, FL 32643 | Mailing Address<br>15 S. MAIN STREET<br>HIGH SPRINGS, FL 32643 |
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|   |   |
|---|---|
| 2. Principal Place of Business<br>Suite, Apt. #, etc. | 3. Mailing Address<br>Suite, Apt. #, etc. |
|---|---|

|                                  |                                  |
|----------------------------------|----------------------------------|
| City & State<br>Zip      Country | City & State<br>Zip      Country |
|----------------------------------|----------------------------------|



11102005    REIN-P    CR2E098 (6/04)

|                                  |   |
|----------------------------------|---|
| 4. FEI Number                    | <input type="checkbox"/> Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired | <input type="checkbox"/> \$8.75 Additional Fee Required                         |

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|--|--|
| <b>6. Name and Address of Current Registered Agent</b><br><br>JABLONSKI, JARROD<br>15 S. MAIN STREET<br>HIGH SPRINGS, FL 32643 | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City |
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

|   |  |
|---|--|
| <b>FILE NOW!!! FEE IS \$150.00</b><br>After January 1, 2006, Fee will be \$300.00 | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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| 10. OFFICERS AND DIRECTORS                     |                                 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                   |  |
|--|---------------------------------|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
|  |                                 | P D<br>Jarrod Jablonski<br>7607 NW 26 Place<br>Gainesville, FL 32606    |  |
|  |                                 | S T D<br>Corey Jablonski<br>17402 NW 234 Terr<br>High Springs, FL 32643 |  |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Corey Jablonski      Date: 11/11/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #