2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P0400086626 1. Entity Name GTS YACHT CLUB, INC.					FILED 2006 OCT -9 AM 9: 46			
Principal Plac	e of Business	Mailing Adoress		1	٥٥ ٩٥ ١	TARY OF	STATE	i
227 N. 28TH AVENUE HOLLYWOOD, FL 33020 US		227 N. 28TH AVENUE HOLLYWOOD, FL 33020 US			tiin eren son son i	TARY OF	ika mira riina Si	Name is Mags
Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10052006	REIN-P	CR2E0	98 (11/05)	
City & State		City & State		4. FEI Number 20-1393			<u> </u>	plied For t Applicable
Zip Country		Zip	Country	5. Certificate of	of Status Desired		\$8.75 Add Fee Require	
	6. Name and Address of Curren	t Registered Agent		7. Name and	Address of New	Registered /	Agent	
SANDELIER, GARY 227 N. 28TH AVENUE HOLLYWOOD, FL 33020			Name					
			Street Address	Street Address (P.O. Box Number is No: Acceptable)				
	,				_			
			City			FL	Zip Cod	е
8. The above the obligation	In med entity submits this statement to a tregistered in ent. One of registered in ent. Sgrature, typerfor the text have of registered ager	lie		1), in the State of F		familiar with,	and accept
	<u> </u>	я ало ше в аррясаме. (моте: ке	egistered Agent signature requ	ured when reinstating)				
	LE NOWII FEE IS \$150.00 SEERLY 1, 2007, Fee WIE be \$300.		gjistered Ageni signature requ	Jired when reinstating)	In accordance corporation did	with s. 607	.193(2)(b), e the prior r	F.S., the
	LE NOWIII FEE IS \$150.06	.00	gistered Agent signature requ		In accordance corporation dis	with s. 607 d not receive	e the prior r	notice.
After Jan 10. TITLE	LE NOWIII FEE IS \$150.00 SEELY 1, 2007, Fee WIE be \$300. OFFICERS AND	.00	11. Tree	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTORS Change	notice.
After Jas	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS	11,	ADDITIONS/C	corporation die	with s. 607 d not receive	DIRECTOR: Change	S IN 11
10. TITLE NAME STREET ADDRESS	DP SANDELIER, GARY	D DIRECTORS	11. TITLE NAME STREET ADDRESS	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change **150	S IN 11
10. TITLE NAME STREET ADDRESS CITY ST-ZIP	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS	11. TITLE NAME STREET ADDRESS CITY ST 7IP	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change	S IN 11 Addition
10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS	11. TITLE NAME STREET ADDRESS OF Y ST 7/P TITLE	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change **150	S IN 11 Addition
After Jac 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS	11. TITLE NAME STREET ADDRESS OFF ST 7IP TITLE NAME STREET ADDRESS OTFY-ST-7IP TITLE	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change **150	S IN 11 Addition
After Jan 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete	11. TITLE NAME STREET ADDRESS OFF ST 7IP TITLE NAME STREET ADDRESS OITY-ST-7IP TITLE NAME	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change 7'5-4 **150 Change	S IN 11 Addition Gl Addition
After Jac 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete	11. TITLE NAME STREET ADDRESS OFF ST 7IP TITLE NAME STREET ADDRESS OTFY-ST-7IP TITLE	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change 7'5-4 **150 Change	S IN 11 Addition Gl Addition
After Jan 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS STREET ADDRESS	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete	11. TITLE NAME STREET ADDRESS OFF ST 7IP TITLE NAME STREET ADDRESS OITY-ST-7IP TITLE NAME STREET ADDRESS	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change 7'5-4 **150 Change	S IN 11 Addition Gl Addition
After Jac 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OFY STIZIP TITLE NAME STREET ADDRESS OFY-STIZIP TITLE NAME STREET ADDRESS OFY-STIZIP TITLE NAME STREET ADDRESS OFY-STIZIP TITLE NAME	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change	S IN 11 Addition Addition Addition
After Jac 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OFFY ST ZIP TITLE NAME STREET ADDRESS OFFY-ST-ZIP TITLE NAME STREET ADDRESS OFFY-ST-ZIP TITLE NAME STREET ADDRESS OFFY ST ZIP TITLE	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change	S IN 11 Addition Addition Addition
After Jac 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS CITY ST 7IP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY ST 7IP TITLE NAME STREET ADDRESS CITY ST 7IP TITLE NAME STREET ADDRESS	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change	S IN 11 Addition Addition Addition
After Jai 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OFFY ST 7IP TITLE NAME NAME NAME	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change	S IN 11 Addition Addition Addition
After Jai 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OFFY ST 7IP TITLE NAME STREET ADDRESS OFFY-ST-7IP TITLE	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change	S IN 11 Addition Addition Addition
After Jas 10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OFFY ST 7IP	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change	S IN 11 Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OFFY ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST ZIP TITLE NAME	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change Change	S IN 11 Addition Addition Addition Addition
TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	DP SANDELIER, GARY 227 N. 28TH AVENUE	D DIRECTORS Delete Delete Delete	11. TITLE NAME STREET ADDRESS OFFY ST ZIP TITLE	ADDITIONS/C	CHANGES TO OF	with s. 607 d not receive	DIRECTOR: Change Change Change Change Change	S IN 11 Addition Addition Addition Addition

12. Thereby certify that the information supplied with this filling coes 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.

CICNATURE Many Sondelie