

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000069731

FILED  
Oct 13, 2009  
Secretary of State

Entity Name: MAKING WAVES MARINE SERVICE, INC.

## Current Principal Place of Business:

5359 STATE ROAD 54  
NEW PORT RICHEY, FL 34652 US

## New Principal Place of Business:

4017 VALENCIA AVE  
NEW PORT RICHEY, FL 34652 US

## Current Mailing Address:

5359 STATE ROAD 54  
NEW PORT RICHEY, FL 34652 US

## New Mailing Address:

4017 VALENCIA AVE  
NEW PORT RICHEY, FL 34652 US

FEI Number: 90-0241583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MUMMA, JAMES  
5359 STATE ROAD 54  
NEW PORT RICHEY, FL 34652 US

## Name and Address of New Registered Agent:

MUMMA, JAMES  
4017 VALENCIA AVE  
NEW PORT RICHEY, FL 34652 US

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.

SIGNATURE: JAMES MUMMA

10/13/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MUMMA, JAMES P  
Address: 5359 STATE ROAD 54  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: SEC (X) Delete  
Name: GLENNY, KARI S/T  
Address: 5359 STATE ROAD 54  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MUMMA, JAMES P  
Address: 4017 VALENCIA AVE  
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES MUMMA

P

10/13/2009

Electronic Signature of Signing Officer or Director

Date