## P05000079725

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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06/02/05--01032--005 \*\*78.75

SECRETARY OF STATE OF STATE OF STATE

Tellnera INN 05 Supp

State of Florida
Dept of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Sirs:

Find attached an application for Registration of Corporation of: **ROBIN MARINE PROJECTS INC.** Find enclosed payment of:

Filing Fees	 \$ 35.00
Registered Agent Designation	\$ 35.00
Certified Copy	\$ 8.75
TOTAL	\$ 78.75

Please remit the Certified Copy to the address of record.

Thank You

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