

Document Number Only

P37628

C T CORPORATION SYSTEM
Requestor's Name
660 East Jefferson Street
Address
Tallahassee, Florida 32301
City State Zip Phone
904-222-1092
CORPORATION(S) NAME

800001731348
-03/04/96--01106--028
*****35.00 *****35.00

Refund
PPD

Seven Seas Cruise Line, Inc.

- ☐ Profit
☐ NonProfit
☐ Limited Liability Company
☐ Foreign
☐ Amendment
☒ Dissolution/Withdrawal
☐ Merger
☐ Mark
☐ Limited Partnership
☐ Annual Report
☐ Reservation
☐ Other
☐ Change of H.A.
☐ Fictitious Name
☐ Certificate
☐ Photo Copies
☐ Call When Ready
☐ Call If Problem
☐ After 4:30
☐ Walk In
☐ Will Wait
☒ Pick Up
☐ Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

3/4/94

PLEASE RETURN EXTRA COPY(8)
FILE 6744150

RECEIVED
94 MAR 11 11:43
DIVISION OF
CORPORATION

CH2E031 (1-89)



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 5, 1996

CT CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: SEVEN SEAS CRUISE LINE, INC.
Ref. Number: P37628

We have received your document for SEVEN SEAS CRUISE LINE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The subject corporation's authority was revoked in Florida on August 25, 1995 for failure to file its corporation annual report. To file a certificate of withdrawal, the corporation would first have to reinstate by completing a reinstatement application and paying a reinstatement fee of \$575.00.

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 1995 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application/annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year for the years 1995 through the current year, \$138.75 corporate supplemental fee for 1992 and every year thereafter.

Therefore, the total amount due to reinstate the corporation is \$575.00. Add an additional \$8.75 for each certificate of status requested.

The total amount due includes the 1996 Annual Report and Supplemental Fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6880.

Karen Gibson
Corporate Specialist

Letter Number: 796A00009604

**STATE OF FLORIDA
OFFICE OF THE COMPTROLLER
APPLICATION FOR REFUND**

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: C T Corporation System EIN or SS#: _____
 Attn: Sonia Delgadillo
 Address: 1633 Broadway
New York, NY 10019

Amount: \$35.00 Date Paid _____
 Reason for claim: WITHDRAWAL OF FILING CERTIFICATE OF WITHDRAWAL
FOR SEVEN SEAS CRUISE LINE, INC., #P37628

Certified true and correct this 30th day of January

XXX Signature Cecilia B. [Signature]

* Must be completed if authority is other than Section 215.26, Florida Statutes.

KAREN GIBSON

For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim:	Amount of recommended refund \$ <u>35.00</u>
The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on State Treasury's Receipt No. <u>01506-02 dated 10/04/96</u>	
Name of Account	<u>45202130001453000000000010000</u>
Statutory Authority for Collection	<u>667.0122</u>
I hereby request that payment be made from the following account:	
NAME OF ACCOUNT	<u>452021300014530000000022002000</u>
Certified true and correct this _____ day of _____, 19____	
Department of State Division of Corporations	(Authorized Signature and Title)