

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000059859

1. Corporation Name

MERSEA SHIPS I, INC.

Principal Place of Business

Mailing Address

~~500 Cypress Creek Road W.~~ ~~500 Cypress Creek Road W~~
~~#500~~ ~~#500~~
Ft. Lauderdale, FL 33309 Ft. Lauderdale, FL 33309

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

899 W. Cypress Creek Road
Suite, Apt. #, etc.
Suite 321

City & State
Ft. Lauderdale, FL

Zip Country
33309 USA

3. New Mailing Address, If Applicable

899 W. Cypress Creek Road
Suite, Apt. #, etc.
Suite 321

City & State
Ft. Lauderdale, FL

Zip Country
33309 USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/25/1993

5. FEI Number

65-0433246

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

FILED

97 MAY -1 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3000002170093-2

05/07/97-D1112-D05

*****923.75 *****923.75

REINSTATEMENT

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Lilja, Peter H.	899 W. Cypress Creek Rd-#321	Ft. Lauderdale, FL 33309
D	Sotgui, Giovanni	899 W. Cypress Creek Rd.-#321	Ft. Lauderdale, FL 33309
D	Blecker, Steven R.	899 W. Cypress Creek Rd.-#321	Ft. Lauderdale, FL 33309

8. Name and Address of Current Registered Agent

Peter Lilja
899 W. Cypress Creek Road - Suite 321
Ft. Lauderdale, Florida 33309

9. Name and Address of New Registered Agent

Name
Steven R. Blecker
Street Address (P.O. Box Number is Not Acceptable)
899 W. Cypress Creek Road - Suite 321
Suite, Apt. #, Etc.
City
Fort Lauderdale
State
FL
Zip Code
33309

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Steven R. Blecker

REGISTERED AGENT MUST SIGN

Date 4/30/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

Date

(954) 493-6500

Daytime Phone #

CR2040 (12/95)