

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

97-02 UBR
Kathleen Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 JAN -7 AM 10: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000001413

1. Corporation Name
ALTERED STATES MARINE INC.

2. Principal Office Address
13008 PALM BEACH BLVD
Suite, Apt. #, etc.

3. Mailing Office Address
SAME
Suite, Apt. #, etc.

City & State
FT MYERS

City & State
FLORIDA

Zip Country
33905 USA

Zip Country
33905 USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number Applied For
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name **Keith H. Kunkowski** 500004785165-9
-01/18/02--01068-011
Street Address (P.O. Box Number is Not Acceptable) **13008 PALM BEACH BLVD** ***915.00 ***915.00
Suite, Apt. #, Etc. **11LS**
City **FT MYERS** State **FL** Zip Code **33905**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent REGISTERED AGENT MUST SIGN

Date **12/13/01**

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Keith H. Kunkowski	13008 PALM BEACH BLVD	FT MYERS FL 33905

10. 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., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. 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:

Date **12/13/01** Daytime Phone #

CPRE081 (8/00)

To Whom it may Concern

202

In 1996-97 The U.S. Post Office Changed
our addresses also 30 days later the County
Changed our addresses two months later
Matlacha became a Historical District

At that point in time we were not even
allowed to have mail boxes. We then
had to get P.O. boxes. In all the
confusion, address changed about 4 times.

I apologize for all the address changes
but it was out of our control.

Please reinstatement for 1/2
of the time I didn't even get mail


President