

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 # **P95000009336**

1. Corporation Name

SEA LORD, INC.

FILED
96 NOV -7 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

4815 GEORGIA AVE.
WEST PALM BEACH FL 33405

4815 GEORGIA AVE.
WEST PALM BEACH FL 33405

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

2. New Principal Office Address, If Applicable

251 Southern Boulevard

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

251 Southern Boulevard

Suite, Apt. #, etc.

City & State

West Palm Beach FL

Zip

33405

Country

City & State

West Palm Beach FL

Zip

33405

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/03/1995

5. FEI Number

65-0582955

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
• P •	GOLDWORN, WILLIAM J	4815 GEORGIA AVE. 251 Southern Boulevard	WEST PALM BEACH FL 33405

888882883788-3
-11/13/96--01185--004
***383.75 ***383.75

8. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name Mark O. Redberg
Street Address (P.O. Box Number is Not Acceptable)
251 Southern Boulevard
Suite, Apt. #, Etc.
City West Palm Beach State FL Zip Code 33405

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

Mark O. Redberg **NOT REQUIRED**
REGISTERED AGENT MUST SIGN

Date 10/7/96

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 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)(i), 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:

Mark O. Redberg **NOT REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/7/96 (361) 833-1882
Date Daytime Phone #