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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 APR 26 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000076892

1. Corporation Name
MARLIN PRODUCTS, INC.

400033961204
04/26/04--01060--016 **300.00
REINSTATEMENT 05-04

2. Principal Office Address	**3.** Mailing Office Address
4770 Biscayne Blvd	4770 Biscayne Blvd.
Suite, Apt. #, etc. 580	Suite, Apt. #, etc. 580
City & State Miami, FL	City & State Miami, FL
Zip 33137 Country US	Zip 33137 Country US

4. Date Incorporated or Qualified To Do Business in Florida 10-2-95

5. FEI Number 65-0624923 ☐ 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: Donald Schenkler

Street Address (P.O. Box Number is Not Acceptable): 4770 Biscayne Blvd.

Suite, Apt. #, Etc.: 580

City: Miami | State: FL | Zip Code: 33137

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 _____ Date 4/23/04
REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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	Donald Schenkler	4770 Biscayne Blvd #580	Miami, FL 33137

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)(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: _____ 4/23/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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B 292

MARLIN PRODUCTS, INC.
4770 BISCAYNE BLVD
SUITE 580
MIAMI, FL 33137
(305) 576-8454

April 19, 2004

Re: Marlin Products, Inc.
Document # P95000076892

To Whom It May Concern:

Enclosed please find a check in the amount of $300.00 for the annual report fees for the years 2003 and 2004. Also, submitted is the reinstatement form which corresponds to reinstate the above referenced corporation.

I never received the UBR from the past year since we have a new address; different than the one recorded with your office. I have made the necessary changes on the reinstatement form.

I would appreciate if you could waive all late fees.

Thank you for your consideration with this matter.

Sincerely,

Donald Schenkler
Marlin Products, Inc.