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PLEASE READ APPLICATION FOR REINSTATEMENT	FLORIDA S		NT OF STATE rtham State"	7	ING THIS F		
DOCUMENT # P 96 0000 79597				98 MAR -9 PM 2: 57			
1. Corporation Name ALL MARINE PROPERTIES, INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business  2051 GRIFFIN ROAD  DANIA FL 33312-5912  If above addresses are incorrect in any way, line thro	2 DAN	51 GRIFFI 1A, FL 33	312-5912	REINS	STATEN	MENT	97-98
2. New Principal Office Address, If Applicable  2.05   GRIFFIN ROAD  Suite, Apt. #, etc.				4. Date Incorporate To Do Busin	orated or Qualified less in Florida	9/25/	11996
City & State	City & State	l. ••••		5. FEI Number 65-0	701121		Applied For
79312 - 5912 Country U.S.A.	33312-	Zip 3312-5912 Country S.A.			OF STATUS DESIRED		ditional Fee required
Names and Street Addresses of Each Officer and/o     Name of Officers	or Director (Florid	<del></del>	<del></del>	<del></del>			
Title(s) and/or Directors 3 (Do NOT			ficer and/or Director se Post Office Box N	lumbers)	4	City / State / Z	
P JACK M. CLARK		506 BEA	AR ROAD		LAKE PL	ACID, FL	33852
S/T KARL THOMAS		3075 S.E. ST. LUCIEBLID STUART, FL 349				34997	
				50	000024 -03/10/ *****90	980106	
					·		
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent  Name  TACK M. CLARK				
2301 N.E. HOTH STREET			Street Address (P 506 Suite, Apt. #, Etc.	.O. Box Number is BEAR	ROAD		
10M11ND BEACH 12 93002			LAKE	PLACID		State Zip S	3852
10. I, deing appointed the registered agent of the above Signature of Registered Agent Record	e named corpora		th and accept the ob	ligations of Section	on 607.0505, F.S. Date	2/98	
11. This corporation owes or ha Intangible Personal Property	s paid the tax due	current yea June 30.	ar Yes 🔲	No 🛭	(See	other side for in on intangible ta	
12. I certify that I am an officer or director or the receive this reinstatement application, the reason for dissolu- owed by the corporation have been paid and the na on this application is true and accurate, and my sign	ution has been eli imes of individua	iminated, the corpo Is listed on this forr	rate name satisfies t n do not qualify for a	he requirements on exemption under	of section 607,0401 c	or 617 0401 - É 9	S that all fees

2/28/98 954/963-2660 Date Daytime Phone #

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: