	PLEASE READ	ALL INSTANCENONS	BEFORE C	OMPLET	ING THIS FORM.	
	PLICATION FOR ISTATEMENT		NT OF STATE rtham State		and the training the training to the training training to the training trai	<i>)</i>
DOCUMENT # P96000095330 1. Corporation Name BAYOU SHIPYARD, INC.				97 NOV 17 AMII: 12 SECRETARY OF STATE TALLAHASSEF FLORIDA		
403-C BAYSHORE DRIVE PENSACOLA FL 32507		403-C BAYSHORE DRIVE PENSACOLA FL 32507				
If above addresses are incorrect in any way, line that 2. New Principal Office Address, It Applicable Sulte, Apt. #, etc. City & State		ough incorrect information and enter correction below. 3. New Mailing Office Address, if Applicable BOX 12525 Sulle, Apl. #, etc.		4. Date Incorporated or Qualified To Do Business In Florida 11/15/1996 5. FEI Number 59-3422375 Not Applicable		
Zip Country		PENSACOLA FL 32575 Country		6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
7. Names	and Street Addresses of Each Officer and				1	
Title(s) 1	and/or Directors		reet Address of Each flicer and/or Director Jsc Post Office Box t	rector City / State / Zip		
D BELL, HARRY L		403-C BAYSHO	re drive	.	PENSACOLA FL 32507	
				10	30002350961 -11/18/9701085- ****165.00 ****	4 -008 165.00
11	8. Name and Address of Current	Registered Agent		9. Name and	Address of New Registered Agent	
BELL, HARRY L 403-C BAYSHORE DRIVE PENSACOLA FL 32507			Name Street Address (P.O. Box Number is Not Acceptable) Sulte, Apt. #, Etc.			
10 I belou	g appointed the projecting agent of the ab	ove named corporation, am familiar v	City vith and accent the o	blinations of Sect	State FL Zip Cod	·e
Signature Registered	of AMIAAA	MALGISTE HE AGENT MUST SIGN			Date 10-27-9	2
	nis corporation owes or h tangible Personal Propei		ear Yes 🗌	No 🛛	(See other side for inform on intangible tax.)	nation
this rein	y that I am an officer or director or the recenstatement application, the reason for dissipy the corporation have been paid and the application is true and accurate, and my supplication is true and accurate.	solution has been eliminated, the corp names of Individuals listed on this fo	orate name satisfies rm do not qualify for	the requirements an exemption un- r oath.	s of section 607.0401 or 617.0401, F.S., ider section 119.07(3)(i), F.S. The inform	that all fees
SIGNA	TURE SIGN TURE AND TYPE O OR P	BHILLED NAME OF SIGNING OFFICER OF	RDIRECTOR		10-27-97 (850)45 Dale Daytime Phor	7-3652



BAYOU SHIPYARD INC. POST OFFICE BOX 12825 PENSACOLA,FLORIDA 32575 PHONE 850-433-1199 FAX 850-434-1431

10/27/97

Division Of Corporations Annual Report / Reinstatement Section P.O.Box 6327 Tallahassee, Florida 32314-6327

We mailed a Second Notice 1997 Profit Corporation Annual Report on about 7 August and enclosed our check number 611 dated 8/5/97 in the amount of \$550.00. We have since received notice from your office that the corporation has been dissolved due to no report being filed.

1 spoke with one of your representatives at the (850) 487-6059 phone number today @ 11:45 a.m. CT and was told to fill out the report, write this letter of explanation and enclose a check for \$165.00.

Harry L/Bell

President

Bayou Shipyard Inc.

Enclosures