

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 # P96000099273

1. Corporation Name

SUNSPASH MARINE ENTERPRISE INC.

Principal Place of Business

203 12TH ST W
PALMETTO FL 34221

Mailing Address

203 12TH ST W
PALMETTO FL 34221

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

12/09/1996

5. FEI Number

☒ Applied For
☐ Not Applicable

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

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
CEO	CARNES, LORENZO L.	203 12TH ST W	PALMETTO FL 34221
	CARNES, LORENZO L.	203 12th St. W	PALMETTO, FL 34221
V	LISK, BRAD	100 HIGHLAND AVE #B	BRADENTON BEACH FL 34217
S	GRIFFIN, TAMMIE	3223 3RD ST W #19	BRADENTON FL 34205
	Thomas Rodolyn	3507 6th Ave W.	Palmetto, FL 34221
T	WILLIAMS, FLOYD	317 11TH ST DR W #B	PALMETTO FL 34221
CEO	FORD, AMANDA	203 12TH ST W	PALMETTO FL 34221
P	FORD, AMANDA	203 12th ST W	PALMETTO FL 34221

8. Name and Address of Current Registered Agent

CARNES, LORENZO L
203 12TH ST W
PALMETTO FL 34221

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
300002093113-- 0
Suite, Apt. #, Etc. -01/07/98--01034--006
City *****236.25 State Zip Code
FL

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 *Lorenzo L. Carnes*
REGISTERED AGENT MUST SIGN

Date 12-29-97

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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: *Lorenzo L. Carnes*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-29-97 722-8593
Date Daytime Phone #

CPRE040 (8/97)