

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION F REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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APPROVED
AND
FILED

98 DEC -7 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000063538**

1. Corporation Name

CAPTAIN'S YACHT CHARTERS, INC.

Principal Place of Business

3170 N. FEDERAL HIGHWAY STE. 100
LIGHTHOUSE POINT FL 33064

Mailing Address

3170 N. FEDERAL HIGHWAY STE. 100
LIGHTHOUSE POINT FL 33064



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/22/1997

5. FEI Number

650515029

Applied For

Not Applicable

6.

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)

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
Pres	Brad Terry	4791 NW 13 Av	Pompano Fl. 33064

000002712450--2
-12/15/98-01029-002
****150.00 ****150.00

12/1/98

8. Name and Address of Current Registered Agent

SMITH, ROBERT H
3170 N. FEDERAL HIGHWAY STE. 100
LIGHTHOUSE POINT FL 33064

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

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

Robert H. Smith

REQUIRED

REGISTERED AGENT MUST SIGN

Date 12/1/98

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:

Brad Terry
REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-1-98(954)241-6794

CR2E040 (9/98)

12-1-98

Division of Corporations

To Whom it concerns,

Thank you for your consideration in this matter. I am late in paying this corporate fee because I was a sea & did not receive the notices.

Thankfully
yours

Captain Brad Emy