

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV 25 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000029894

1. Corporation Name

U.S. YACHT BROKERAGE, INC.

Principal Place of Business

15013 MADEIRA WAY
MADEIRA BEACH FL 33708

Mailing Address

15013 MADEIRA WAY
MADEIRA BEACH FL 33708

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

03/30/1998

5. FEI Number

59-3521570

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status



700009198487
11/25/02--01028--007 **150.00

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 3	City / State / Zip 4
P	ULLIAN, DAN	6088 28TH TERR N	ST PETERSBURG FL 33710
ST	ULLIAN, DEBBIE	6088 28TH TERR N	ST PETERSBURG FL 33710

8. Name and Address of Current Registered Agent

ULLIAN, DANIEL F
6088 28 TERRACE NO
ST PETERSBURG FL 33710

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/26/2002

11. 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0069

U.S. YACHT BROKERAGE INC.

15013 Madeira Way Madeira Beach, Fl 33708

727- 391 0069 Fax 727-391-2175



**Florida Dept of State
Division of Corporations.**

Please accept my application for re-instatement. I had not recieved the renewal and was shocked when I recieved this cancellation letter.

Please advise me that you have recieved this correspondence.

Respectfully,

**Dan Ullian
Broker/Owner**

A handwritten signature in cursive script, appearing to read 'Dan Ullian'.

11/20/2002