PLEASE READ	ALL'INST	RUCTIONS	BEFORE C	OMPLETI	NG THIS 👩	mid:	2 \	
APPLICATION EOR		A DEPARTMEN	IT OF STATE		· · · · · · · · · · · · · · · · · · ·)	
REINSTATEMENT ***	DI	VISION OF CORPOR	ATIONS		FILE)		
DOCUMENT # P9900008944				00 OCT 19 PM 4: 21				
1. Corporation Name				SECRETARY OF STATE TALLAHASSEE, FLORIDA				
YACHT WOODWORKING SYS	I EIVIO, IIV	IC.			rallana-see,	FLURIDA		
0202 VII 2102 11021 0111 101		D AVE. BAY 101 ERDALE FL 33316						
If above addresses are incorrect in any way, line through incorrect. New Principal Office Address, If Applicable 3. New		nformation and enter on ng Office Address, If A		Date Incorporated or Qualified				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			To Do Business in Florida 01/25/1999 5. FEI Number (05: 0 2009 Applied For				
City & State	City & State						Not Applicable	
^{Zip} 33315 Country	Zip 33	315 Country	y	6. CERTIFICATE	OF STATUS DESIRED		onal Fee required it	
7. Names and Street Addresses of Each Officer and Name of Officers	or Director (Flo		itions must list at lea					
Title(s) and/or Directors 1 2		3 Offi		· · · · · · · · · · · · · · · · · · ·	City / State / Zip			
D HANRAHAN, KEVIN		3232-SW-2ND-AVE, BAY-101			FORT LAUDERDALE FL 33316			
D Hanrahan, Kevin		3232 SW 200 Ave, Bay 10			Fortlanderdale, Fl 33315			
					7000034467178 -11/01/0001043012 ****150.00 ****150.00		78 3012 **150.00	
							SP.	
8. Name and Address of Current Registered Agent Name			Name	9. Name and /	Address of New Regis	tered Agent	(8/00)	
Hanrahan, Kevin 3232 Sw 2nd Ave, Bay 101 Fort Lauderdale FL 33316		Street Address (P. Suite, Apt. #, Etc.		O. Box Number is Not Acceptable)				
TONI ENDENDALE TE SOCIO		•	City	 .		State Zip Co	3315	
10. I, being appointed the egistered eggot of the Ab Signature of Registered Agent	TURE	FOR THE SECTION OF TH	ith and accept the o	bligations of Sect	Date			
11. I certify that I am an officer or director or the rece this reinstatement application, the reason for des owed by the corporation have been paid and the on this application is true and accurate, and mys	olution has been	n eliminated, the corpo	orate name satisfies m do not qualify for	the requirements an exemption un	s of section 607.0401 or	1617.U4U1, F.S.,	, that all fees	
SIGNATURE: SIGNATURE AND PYPED OR PR		SIGNING OFFICER OR			Date	Daytime Pho	ine#	



Yacht Woodworking Systems, Inc.

3232 S.W. 2nd Ave., Bay 101 Fort Lauderdale, Florida 33315 Phone (954) 763-9997 Fax (954) 763-2074

October 16, 2000

Department of State **Division of Corporations** P.O Box 6327 Tallahassee, FL 32314

RE: DOCUMENT #P99000008944 - Yacht Woodworking Systems, Inc. To whom it may concern:

Attached is a completed Application for Reinstatement for Yacht Woodworking Systems, Inc. 1 understand that I must file this application in order to reinstate my company as a Corporation.

I am requesting a waiver of the \$600 reinstatement fee, however, as I had never received the notices earlier this year. I can only guess that the reason for my not receiving the notice is because the incorrect zip code was reflected in your records. I've noted the correct zip code on the Application for Reinstatement. I hope that this correction can be made in your records and that you can grant the \$600 reinstatement fee waiver.

I was told by one of your representatives to include a check in the amount of \$150.00 for the annual dues fee with this letter, which I have done.

Thank you for your attention in this matter.

Sincerel

Director, Yacht Woodworking Systems, Inc.