


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																									
DOCUMENT # P99000013398 1. Corporation Name FISH MONGER OF THE KEYS, INC.																											
2. Principal Office Address 4590 OVERSEAS HIGHWAY Suite, Apt. #, etc.		3. Mailing Office Address SAME Suite, Apt. #, etc.																									
City & State MARATHON, FL		City & State																									
Zip 33050	Country USA	4. Date Incorporated or Qualified To Do Business in Florida 02/10/99 5. FEI Number 65-0897872 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status																									
7. Name and Address of Current Registered Agent Name: FRANK MANSON Street Address (P.O. Box Number is Not Acceptable): 4590 OVERSEAS HIGHWAY Suite, Apt. #, Etc.: City: MARATHON State: FL Zip Code: 33050																											
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent: <i>Frank J. Manson</i> Date: 11/20/2001 REGISTERED AGENT MUST SIGN																											
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Titles</th> <th style="width: 30%;">Name of Officers and/or Directors</th> <th style="width: 30%;">Street Address of Each Officer and/or Director</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>P.</td> <td>FRANK MANSON</td> <td>4590 OVERSEAS HIGHWAY</td> <td>MARATHON, FL 33050</td> </tr> <tr> <td>ST</td> <td>MARGARET MANSON</td> <td>4590 OVERSEAS HIGHWAY</td> <td>MARATHON, FL 33050</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>				Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	P.	FRANK MANSON	4590 OVERSEAS HIGHWAY	MARATHON, FL 33050	ST	MARGARET MANSON	4590 OVERSEAS HIGHWAY	MARATHON, FL 33050												
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10. 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: <i>Frank J. Manson</i> FRANK J. MANSON Date: 11/20/01 Daytime Phone #: 305-743-3500 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																											

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 01 DEC -3 PM 4:07

REINSTATEMENT 01

AMOUNT DUE = \$750.00

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 *****750.00 *****750.00

CR2001 (9/00)