


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

10FZ

APPLICATION FOR ~~REINSTATEMENT~~  FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

2000 UBE

FILED
 00 OCT 19 AM 11:41
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # P99000014249
 1. Corporation Name
 YACHT DOCS, INC.

Principal Place of Business Mailing Address
~~6559 B CHASEWOOD DRIVE NORTH JUPITER FL 33458~~
~~6559 B CHASEWOOD DRIVE NORTH JUPITER FL 33458~~



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

2. New Principal Office Address, If Applicable
 2385C PEA Blvd.
 Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable
 2385C PEA Blvd.
 Suite, Apt. #, etc.

City & State
 Palm Beach Gardens
 Zip 33410 Country US

4. Date Incorporated or Qualified To Do Business in Florida
 02/12/1999

5. FEI Number
 65-0897709
 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	4 City / State / Zip
President	Charles L. Navis	2385C PEA Blvd.	Palm Beach Gardens, FL 33410

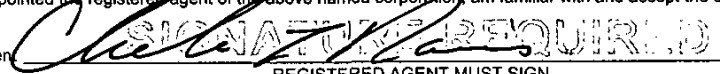
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 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

NAVIS, CHARLES L
 6559 B CHASEWOOD DRIVE NORTH
 JUPITER FL 33458

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  REGISTERED AGENT MUST SIGN
 Date 10-17-00

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date 10-17-00 Daytime Phone # 561-627-2300

CR2E040 (800)

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ZOFZ

Yacht Docs, Inc.
2385C PGA Blvd.
Palm Beach Gardens, FL 33410

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Yacht Docs, Inc.

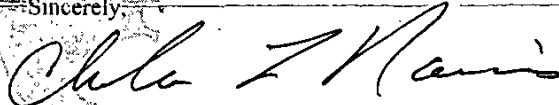
October 17, 2000

Department of State
Divisions of Corporation
PO Box 6327
Tallahassee, FL 32314

To whom it may concern,

Please find enclosed a check and application for reinstatement of our corporation. We did not receive the Uniform Business application originally. The address you had on file was wrong, but the mail was being forwarded to the new address. We did receive the dissolve notice at the correct address, which leads me to believe that it was not sent originally. We try very hard to keep up with all of our corporation papers, and I am certain that I would of sent that in immediately to your office. Please accept the \$150 as payment in full for any penalties. Your understanding in this matter is greatly appreciated.

Sincerely,



Charles L. Navis

Charles L. Navis
President/Owner

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