

2006 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED
AND
FILED

1072

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


REINSTATEMENT

05-06



PSC

02282006 REIN-P CR2E098 (11/05)

DOCUMENT # P99000050940			
1. Entity Name MARINE X-TREME SALES, INC.			
Principal Place of Business 1505 PONCE DE LEON BLVD CORAL GABLES, FL 33134 US		Mailing Address 1505 PONCE DE LEON BLVD CORAL GABLES, FL 33134 US	
2. Principal Place of Business 1366 S. Federal Hwy Suite, Apt. #, etc. Pompano Beach City & State Florida Zip 33062 Country USA		3. Mailing Address 1366 S. Federal Hwy Suite, Apt. #, etc. Pompano Beach Fl City & State Pompano Beach Fl Zip 33062 Country USA	
4. FEI Number 65-0925278		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AVILA, BELKYS 4920 SW 168TH AVENUE FT. LAUDERDALE, FL 33331		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Belkys Avila</i></u> DATE <u>2/28/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$300.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIVERO, HECTOR L 18201 N.W. 16 ST HOLLYWOOD, FL 33029 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000067377870 03/08/06--01006--018 **300.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AVILA, BELKYS 4920 SW 168TH AVENUE FT. LAUDERDALE, FL 33331 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Belkys Avila* 2/28/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2072

**MARINE X-TREME SALES, INC.
1366 S. FEDERAL HWY
POMPANO BEACH, FL 33062**

February 7, 2006

*Florida Dept of State
Division of Corporation*

*Re: Annual Report 2005
& 2006
Doc #P99000050940*

Gentlemen:

*This letter is to inform you that the company's address has changed. Annual Report/
Uniform Business Report or other source of reminder from your department, for the year
2005 and 2006 has not been received by our office.*

*We have enclosed a check in the amount of \$300.00 as well as a reinstatement form
with the corrected address.. We ask that you credit this payment accordingly and that
you consider the above mentioned in order to waive any incurred late charges.*

*We appreciate your prompt attention and thank you in advance for your cooperation in
this matter.*

*Respectfully submitted,
Hector Rivero
PRESIDENT*