

pg 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 FEB 18 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000057586**

1. Corporation Name
AMERICAN MARINE UPHOLSTERY, INC.

2. Principal Office Address 5840 217 ST. EAST		3. Mailing Office Address 5840 217 ST. EAST	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State BRADENTON FL		City & State BRADENTON FL	
Zip 34202	Country MANATEE	Zip 34202	Country MANATEE

600005050656--1.
-03/06/02--01064--009
****300.00 ****300.00

4. Date Incorporated or Qualified To Do Business in Florida **6/23/99**

5. FEI Number **65-0946979**

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name **BRUCE F. ROBERTS**

Street Address (P.O. Box Number is Not Acceptable)
7753 STATE ROAD 72

Suite, Apt. #, Etc.

City **SARASOTA** State **FL** Zip Code **34241**

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 **Bruce F. Roberts** Date **1-29-02**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	JAMES L. GORSKEY	5840 217TH ST. E.	BRADENTON FL 34202
SD	TAMI M. GORSKEY	5840 217TH ST. E.	BRADENTON FL 34202

01-02 UBR LUBC 178

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: **JAMES L. GORSKEY** Date **1-29-02** Daytime Phone # **941-727-6825**

pg 2 of 2

Bruce F. Roberts & Associates
Tax Accountant – Management Consultants
P. O. Box 17937
Sarasota, Florida 34276-0937

Phone 941-921-2116

Fax 941-922-8865

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

RE: American Marine Upholstery, Inc.

Dear Sirs or Madam,

Enclosed please find the Corporate Reinstatement form for the above-mentioned client, and a check for \$300.00 to cover the renewal fees for this document.

The check is for two years (2001 and 2002) Corporate annual renewals.

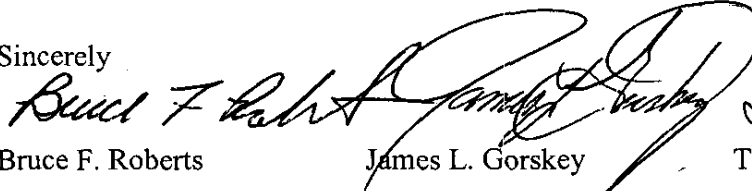
We are requesting an abatement of the late filing fees for the following reasons:
The non-payment of the 2001 renewal was not intentional. They never received any of the renewal notices. The address for the corporation, while correct, is out in a very rural area of Manatee County. Their mail service in the past year has been very poor due to the multiple letter carriers that have been on the route. In addition their mail box is routinely vandalized, destroyed, and even stolen. Therefore the notices from the state never arrived!

They will be opening a P.O. Box soon and will have the corporations address changed to that, so this problem will not happen again.

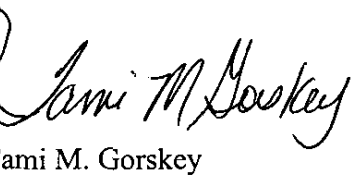
If you have any questions, please contact myself, or my clients who have also co-signed this letter.

Thank you for your assistance.

Sincerely


Bruce F. Roberts


James L. Gorskey


Tami M. Gorskey