

2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 NOV 10 PM 5:18

DOCUMENT # P99000073870

1. Entity Name

TEMPEST YACHTS OF FLORIDA, INC.



Principal Place of Business

1103 12TH AVENUE E
PALMETTO, FL 34221

Mailing Address

221 WEST 26TH STREET
NEW YORK, NY 10001

REINSTATEMENT 05



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

10212005

REIN-P

CR2E098 (6/04)

4. FEI Number

65-0952827

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK, INC
11380 PROSPERITY FARMS ROAD, 221E
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent

Name

Ronald N. Johnson

Street Address (P.O. Box Number is Not Acceptable)

3246 S. Grandview Avenue

City

Daytona Beach

FL

Zip Code

32118

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

Ronald N. Johnson

Ronald N. Johnson

10/21/05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2006, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CEO
DUKE, ANTON
221 WEST 26TH ST
NEW YORK, NY 10001

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 empowerments.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

10/21/05 (386) 252-3694

Date

Daytime Phone #