j 4	PLEAS	SE READ A				BEFORE C		NG THI	S FOR	М.		(I
APF REJN	PLICATION TAGE STATEMENT	363		NEPAF Kather Secreta	ine Ha ry of Si	tate		ri Lightar TON OF	፲ _ዩ ፲፱ ፲፱	ATIC) .; 6	U
DOCUMENT # P99000090293 1. Corporation Name							00 OCT 20 AM II: 01					
BOATS	SS.COM CORF	P.										
Principal Pla	ace of Business		Mailing Addre	SS		·						
3550 GALT OCEAN MILE UNIT #1808 FORT LAUDERDALE FL 33308			3550 GALT OCEAN MILE UNIT #1808 FORT LAUDERDALE FL 33308									
If above addresses are incorrect in any way, line through incorrect information and enter correction below.							09-18-00 9000 3005 \$550.00					
				3. New Mailing Office Address, if Applicable 18 10 GARFIELD S7			Date Incorporated or Qualified To Do Business in Florida 10/13/1999					
Suite, Apt. 1	etc.		Suite, Apt. #,	etc.			5. FEI Number		1101	10 <u>1</u>	Applied	For
City & State	LLYWOOL	FL	City & State	4000	00 Z	FL	65-6	195 6	1134	<u> </u>	Not App	
Zip / 3	Country U.S.	S A	3306	0	Country	sA		OF STATUS	DESIRED		Additional Fee i a Certificate of S	
7. Names a	and Street Addresses of		or Director (Flo	ida nonprof		tions must list at lea		· · · · · · · · · · · · · · · · · · ·				
						cer and/or Director City / State / Zip				a / Zip		
PSTD	PSTD SEEGOTT, SCOTT C			3550 GALT OCEAN MILE UNIT #18			1808 FORT LAUDERDALE FL 33308					
			***					,				
							M	10 31				
					-	,	——————————————————————————————————————		. <u>.</u>			***
8. Name and Address of Current Registered Agent							9. Name and A	Address of N	ew Registe	red Ag	ent	
Name S C C						071 5	EEC	3071	,			
SPIEGEL & UTRERA, P.A. Street Address (F 343 ALMERIA AVENUE						P.O. Box Number is Not Acceptable) O GARFIELD 57						
CORAL GABLES FL 33134 Suite, Apt. #, Etc												
						City HOLL	YWO	OP		State	3306	\mathcal{D}^{-}
10. I, being Signature of Registered		agent of the abo	ve named corpo	oration, am f	familiar wi	th and accept the o	bligations of Sect	on 607.0505 Date	F.S.	-/	1-200	00
11. I certify this rein owed by	that I am an officer or di statement application, th y the corporation have be	e reason for disso een paid and the r	ver or trustee en lution has been names of individ	eliminated, uals listed c	execute the corpo	rate name satisfies m do not qualify for	the requirements an exemption un	of section 60)7.0401 or 6	17.040	1, F.S., that all f	ees
on this	application is true and ac	curate, and my sig	nature shall ha	ve the same	legal effe	ect as if made unde	r oath.					

SIGNATURE: SIGNATURE AND TYPED OR PRINTED TOME OF SIGNING OFFICER OR DIRECTOR

10/17/2000

TO:

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FROM

Boatss.com Corp 1810 Garfield St. Hollywood, FL 33020

Scott Seegott, Officer and Registered Agent

REF

INSTRUCTIONS RECEIVED THIS DATE FROM REINSTATEMENT DEPT. DOCUMENT # 79900090293

To whom it may concern:

In September, 2000 we sent our 2000 UNIFORM BUSINESS REPORT #P99000090293 to the Dept. Of State along with our check for \$550. The check was paid by our bank on 9/18/2000. In this report we changed the address of the registered agent and the officer. Today, 10/17/2000 we received the notice of dissolution of the corporation. Upon our telephone call, we were informed that another mailing was sent to us requesting our FEI number. We did not receive this mailing - probably due to the change of address.

INSTRUCTIONS FROM TELEPHONE CALL TO REINSTATEMENT DEPT. ON 10/17/2000.

- Enter FEI number onto the application for reinstatement, which we have done.
- 2. Since our check cleared our bank, there are no additional fees since we did not receive the correspondence requesting additional information.

We would like to thank your dept. for their quick and knowledgable assistance in this matter.

Sincerely,

Scott Seegott

Officer and Registered Agent for Boatss.com Corp.