

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 29 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000090719

1. Corporation Name

Tenmark Marine, Inc.

2. Principal Office Address

712 E. Colonial Dr.

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32803

Country

U.S.A.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

REINSTATEMENT 02-04

**4. Date Incorporated or Qualified
To Do Business in Florida**

Oct. 14, 1999

5. FEI Number

59-3602866

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Munir A. Khan

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

712 E. Colonial Drive

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32803

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

Date 10/18/04

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
P/D	Munir A. Khan	712 E. Colonial Dr.	Orlando, FL 32803
S/D	Emilio G. Tsokopoulos	1007 N. America Way, Suite 407	Miami, FL 33132

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Munir A. Khan

Date

10/18/04

Daytime Phone #

407-245-2977

CR2E081 (01/04)