

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000097690

FILED
Sep 28, 2011
Secretary of State

Entity Name: NAUTICAL OUTFITTERS CORP.

Current Principal Place of Business:

1627 S DIXIE HWY
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

1627 S DIXIE HWY
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: 11-3523358 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: JACQUELINE N. CASPER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD
Name: GLEN, JAMES
Address: 131 ROUND SWAMP RD
City-St-Zip: HUNTINGTON, NY 11743

Title: VPD
Name: DISTEFANO, JOSEPH
Address: 7 PEACOCK PATH
City-St-Zip: CORAM, NY 11727

Title: S
Name: LAMB, ANTHONY
Address: 3440 HAWTHORNE DR S
City-St-Zip: WANTAGH, NY 11793

Title: D
Name: FLAXMAN, JOAN
Address: 200 STERLING RD
City-St-Zip: HARRISON, NY

Title: D
Name: DEVINE, ROBERT
Address: 128 WATERS EDGE
City-St-Zip: JUPITER, FL 33477

Title: D
Name: PIVAR, STUART
Address: 15 W 67TH STREET
City-St-Zip: NEW YORK, NY

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOAN FLAXMAN

VP

09/28/2011

Electronic Signature of Signing Officer or Director

Date