

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

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

FILED

01 JAN -9 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

P99000101617 Man O'War Charters, Inc.

2. Principal Office Address

118 Vacation Drive

Suite, Apt. #, etc.

City & State

Tavernier, FL

Zip

33070

Country

USA

3. Mailing Office Address

600 Runnymede Avenue

Suite, Apt. #, etc.

City & State

Jenkintown, PA

Zip

19046

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11-19-99

5. FEI Number

52-2203146

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 00-01

7. Name and Address of Current Registered Agent

Name

Joseph Mc Hugh

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

118 Vacation Drive

Suite, Apt. #, Etc.

City

Tavernier

700003601727-8
-01/30/01--01076--007
State **FL** Zip **33070** ***\$900.00

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

JOSEPH B. McHUGH
REGISTERED AGENT MUST SIGN

Date *1/8/2001*

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	Vin Sparano	130 Arnold Avenue	Barnegat Light, NJ 08006
V	Joseph Mc Hugh	600 Runnymede Avenue	Jenkintown, PA 19046

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: *JOSEPH B. McHUGH*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/8/2001

Daytime Phone #