

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



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

FILED
Apr 26, 2002 8:00 A.M.
Secretary of State

DOCUMENT # P99000108443

1. Corporation Name

Dolphin Systems & Supply, Inc.

2. Principal Office Address

2800 W. Navy Blvd.

3. Mailing Office Address

2800 W. Navy Blvd.

Suite, Apt. #, etc.

Suite 4

Suite, Apt. #, etc.

Suite 4

City & State

Pensacola, FL

City & State

Pensacola, FL

Zip

32505

Country

USA

Zip

32505

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 12/09/1999

5. FEI Number

59-3615863

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

Patroni, Clyde J.

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

5 Sabine Drive

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32561

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 April 25, 2002

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	Patroni, Clyde J., Sr.	5 Sabine Dr.	Pensacola, FL 32561
P	VanAlstine, Timothy	5704 Nicklous Lane	Milton, FL 32570
P	Moore, Donald	PO Box 10038	Pensacola, FL 32524
P	Hord, Thomas	104 Bayon Lane	Kemah, TX 77565

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: Clyde J. Patroni

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

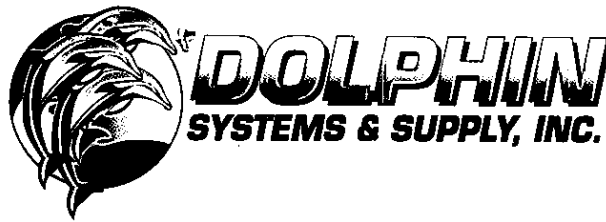
04/25/02 (850) 469-0453

Date

Daytime Phone #

CR2E081 (9/01)

OK 5/6/02



April 25, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Reinstatement for Dolphin Systems & Supply, Inc
Document # P99000108443

To Whom It May Concern:

This letter accompanies the request for corporation reinstatement. Dolphin Systems & Supply, Inc. never received the Uniform Business Report (annual report) for the years 2001 and 2002. Accordingly, the forms were never filed with the state, and the company's corporate status was changed to inactive.

This letter is to request the reversal of fines and/or penalties assessed to reinstate corporate status to active. The reinstatement application is attached, as well as a check for \$308.75 (to cover the filing fee for 2001 & 2002 and the certificate of status request).

Thank you for your time and assistance with this matter.

Clyde J. Patroni
President