PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 JUL 16 PM 12:24
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # V02179

REINSTATEMENT 01-03

1. Corporation Name
TRANS-MAR YACHT SALES, INC.

2. Principal Office Address	3. Mailing Office Address
2601 South Bayshore Drive	2601 South Bayshore Drive
Suite, Apt. #, etc. 1250	Suite, Apt. #, etc. 1250
City & State Miami, FL	City & State Miami, FL
Zip 33133 Country USA	Zip 33133 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/24/1991

5. FEI Number: 650307254 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $6.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Robert A. Freeman, P.A.

Street Address (P.O. Box Number is Not Acceptable): 2601 South Bayshore Drive

Suite, Apt. #, Etc.: Suite 1250

City: Miami | State: FL | Zip Code: 331333

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: [signature] REGISTERED AGENT MUST SIGN Date: July 15, 2003

CR2E061 (10/02)

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
PD	Richard Simon	19707 Turnberry Way T4	Aventura, FL 33180
S	Robert A. Freeman	2601 South Bayshore Drive, #1250	Miami, FL 33133

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] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 7/15/03 — Daytime Phone #: 305-932-5414

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

TRANS-MAR YACHT SALES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$1,050.00