2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # V16597 1. Entity Name SPORTFISHING GUIDE SERVICES, INC.							FILED	
Principal Place of Busines 14913 WARMAN STREE TAMPA, FL 33613	Mailing Address 14913 WARMAN STREET TAMPA, FL 33613				PR 22 PM 2: Tary of Sta			
2. Principal Place of Business		3. Mailing Address						
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			04202005	REIN-P	CR2E098 (6/04)	
City & State		City & State		4. FEI Number 59-3109		N	oplied For ot Applicable	
Zlp	Country Zip Cou		Coun	try	5. Certificate of Status Desired \$8.75 Additional Fee Required			
8. Nam	tegistered Agent Name		Name	7. Name and	Address of New R	egistered Agent		
MARKETT, DAVIS L JR 14913 WARMAN STREET TAMPA, FL 33613					(P.O. Box Numbe	r la Not Acceptable)	
				City			FL Zip Coo	le
8. The above named epithy sybmits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or critical name of registered agent and trie of Expliphable. (NOTE: Registered Agent algorithms required when refinetating) FILE NOW!!! FEE IS \$900.00								
10.	OFFICERS AND		11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTOR	
NAME MARKET STREET ADDRESS 14913 W	T, DAVIS L.JR. ARMAN STREET FL 33613	☐ Delete					(Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	s			E E ET ADORESS -ST-ZIP	80 05/10.	000543 /0501082	225 653 021 **900	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete						☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delste					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	CITY	E ET ADORESS -ST-ZIP			☐ Change	☐ Addition
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information incloated on this report or supplemental report is true and accurate and that my 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 entrustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered. SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF MANNE OF MAN								

DAVIS L. MARKETT, JR., President

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