

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# V34360

**FILED**  
**Oct 14, 2010**  
**Secretary of State**

**Entity Name:** SCANDINAVIAN SOUTH MARINE CORPORATION

**Current Principal Place of Business:**

8693 MARITIME ST  
JACKSONVILLE, FL 32226

**New Principal Place of Business:**

336 TENTH STREET  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

PO BOX 28639  
JACKSONVILLE, FL 32226

**New Mailing Address:**

336 TENTH STREET  
ATLANTIC BEACH, FL 32233

**FEI Number:** 59-3121171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILEY, KATHLEEN  
8693 MARITIME ST  
JACKSONVILLE, FL 32226 US

**Name and Address of New Registered Agent:**

BULL, KATHLEEN  
336 TENTH STREET  
ATLANTIC BEACH, FL 32233 US

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: KATHLEEN WILEY BULL

10/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: LINDEBACK, MAGNUS  
Address: 336 TENTH STREET  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DV  
Name: BULL, KATHLEEN W  
Address: 336 TENTH STREET  
City-St-Zip: ATLANTIC BEACH, FL 32233

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: KATHLEEN WILEY BULL

DV

10/14/2010

Electronic Signature of Signing Officer or Director

Date