## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # J78594**

1. Corporation Name

MARITIME ELECTRIC, INC

(AIL/LI) E IIAI	E CLEOTHIO, INC.							
Principal Place	e of Business	Mailing Address			-  I INDIAID DESCRIPTION (DECENDED DESCRIPTION DE	IAT <b>Biği Gib</b> il <b>G</b> il	irs Billis graft 6)	Bir Gibti jani
Principal Place of Business 4734 JEFFERSON STREET		4747 HOLLYWOOD BLVD. #112						
HOLLYWOOD FL 33021		HOLLYWOOD FL 33021						
US		US			DO NOT WRIT		SPACE	
					3. Date Incorporated or Qualifed 06/19/1987			
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		- <del></del>	lied For	
21		26		65-0002636			Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. "Certifcate of Status Desired	<b>K</b> X	\$8.75 A		
22		27				Fee Rec		
City & State		City & State		6. Election Campaign Financing		\$5.00	•	
23		28		Trust Fund Contribution		Added to	Fees	
Zip	Country	Zip	Country		8. This corporation owes the curr		ngible Y	ÄNo
24	25		30		Personal Property Tax.			ZNO
	9. Name and Address of Curre	ent Registered Agent	81	Mama	10. Name and Address of New F	cegistered A	rgent	
enu	THEAST ACCOUNTING & TAX	CDUID INC	01	Name				
	NW 5TH WAY	anour ino	82	Street Addre	ess (P.O. Box Number is Not Accepta	able)		
	T LAUDERDALE FL 33309							
FUN	LAUDENDALE PL 33309		83					
			84	City			85 Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,				<u> </u>		<u>FL</u>	<del></del> _	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was at	utnonzea by	tne corporatio	oration submits this statement for the n's board of directors. I hereby accep	ot the appoin	tment as reg	istered
SIGNATURE								
	Signature, typed or printed name of registered ag			t signature required	when reinstating)  ADDITIONS/CHANGES TO OF	DATE EICERS AND	DIRECTOR	2S IN 12
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICENS AND	Change	Addition
TITLE	D DELETE		1.1 TITLE					
NAME	RUDNICK, CARL		1.2 NAME					
STREET ADDRESS			1.3 STREET ADDRESS					
CITY-\$1-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP				Change	Addition
TITLE			2.1 TITLE				Onlange	
NAME	· ·		2.2 NAME					
STREET ADDRESS	ET ADDRESS		2.3 STREET	ADDRESS				
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP			[1] Change	Addition
TITLE	□ DELÉTÉ		3.1 TITLE					[_] Addition
NAME	E		3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-S	T-ZIP				
TITLE	□ DELETE		4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS					,			
CITY-ST-ZIP	I		5.3 STREET	ADDRESS				
			5.4 CITY-S					
TITLE	:-	☐ DELETE					☐ Change	☐ Addition
TITLE NAME		☐ DELETE	5.4 CITY-S		· · · · · · · · · · · · · · · · · · ·		☐ Change	☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapged, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNAZURE FCARD RUDNICKO

2/4/99

954 967-8537

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90113 036 \*\*\*158.75

Daytime Phone #

CR2E034 (11/98)