

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000069738

FILED
Mar 15, 2009
Secretary of State

Entity Name: BISING MARINE GROUP, INC.

Current Principal Place of Business:

3912 SAGES DR.
INDIAN TRAIL, NC 28079

New Principal Place of Business:

3910 BALSAM STREET
INDIAN TRAIL, NC 28079

Current Mailing Address:

3912 SAGES DR.
INDIAN TRAIL, NC 28079

New Mailing Address:

3910 BALSAM STREET
INDIAN TRAIL, NC 28079

FEI Number: 65-1137459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANNA, JESSICA
3477 NORTH WEST 44TH STREET
UNIT 104
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BISING, GUY C SR.
Address: 3912 SAGES DRIVE
City-St-Zip: INDIAN TRAIL, NC 28079

Title: ST () Delete
Name: BISING, GUY C JR.
Address: 14341 LONG CHANNEL DRIVE
City-St-Zip: GERMANTOWN, MD 20876 US

Title: V () Delete
Name: SUMMERROW, KIMBERLY B
Address: 10514 OLD CAROLINA DRIVE
City-St-Zip: CHARLOTTE, NC 28214 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BISING, GUY C SR.
Address: 3910 BALSAM STREET
City-St-Zip: INDIAN TRAIL, NC 28079

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: SUMMERROW, KIMBERLY B MRS.
Address: 10514 OLD CAROLINA DRIVE
City-St-Zip: CHARLOTTE, NC 28214 US

Title: V () Change (X) Addition
Name: FISHER, JEAN M MS
Address: 3910 BALSAM STREET
City-St-Zip: INDIAN TRAIL, NC 28079

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GUY CARL BISING SR

P

03/15/2009

Electronic Signature of Signing Officer or Director

_____ Date