

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Suzanne B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**

95 MAR 30 AM 10:52

**DOCUMENT # P93000081977 (9)**

1. Corporation Name  
**SPECIALTY MARKETING OCEAN EXPORTS, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business ~~2000 GULF BLVD SUITE 101 INDIAN SHORES FL 34635~~ **2113 GULF BOULEVARD INDIAN ROCKS BEACH, FL. 34635**  
Mailing Address ~~2000 GULF BLVD SUITE 101 INDIAN SHORES FL 34635~~ **2113 GULF BLVD INDIAN ROCKS BEACH, FL. 34635**

3. Date Incorporated or Qualified <b>11/22/1993</b>	3a. Date of Last Report <b>10/18/1994</b>
4. FEI Number <b>59-3215437</b>	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 <b>2113 GULF BOULEVARD</b>	2a. Mailing Address 26 <b>← SAME</b>
22 Suite, Apt. #, etc. <b>N/A</b>	27 Suite, Apt. #, etc.
23 City & State <b>INDIAN ROCKS Bch, FL.</b>	28 City & State
24 Zip <b>34635</b>	25 Country <b>PINELLAS</b>
29 Zip	30 Country

9. Name and Address of Current Registered Agent  
**SWANK, STEVEN W**  
**446 HARBOR DRIVE, S-**  
**INDIAN ROCKS BEACH FL 34644**

10. Name and Address of New Registered Agent

81 Name <b>STEVEN W. SWANK</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>19531 GULF BOULEVARD, #311</b>
83
84 City <b>SHORES INDIAN ROCKS BEACH, FL</b>
85 Zip Code <b>34635</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Steven W. Swank* **STEVEN W. SWANK, PRESIDENT** **MARCH 22, 1995**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>SWANK, STEVEN W</b>
STREET ADDRESS	<b>446 HARBOR DRIVE S.</b>
CITY ST ZIP	<b>INDIAN ROCKS BEACH FL 34644</b>
TITLE	<b>D</b>
NAME	<b>BORTOLI, JOHN E</b>
STREET ADDRESS	<b>50 JOHNS STREET</b>
CITY ST ZIP	<b>JOHNSTOWN PA 15901</b>
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<b>D-P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<b>SWANK, STEVEN W</b>	
13 STREET ADDRESS	<b>19531 GULF BOULEVARD, #311</b>	
14 CITY ST ZIP	<b>INDIAN SHORES, FL. 34635</b>	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY ST ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(3)(k), Florida Statutes. I further certify that the information included in 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 changed, or on an attachment with an address.

SIGNATURE: *Steven W. Swank* **STEVEN W. SWANK** **MARCH 22, 1995** **(813) 595-6100**