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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000097134 (6)

SHIP OPERATIONS SERVICES, INC.

## **FILED** May 06 1998 8:00am Secretary of State



Date of the Principle						—		
Suite, Apt. #, etc.		Mailing Address						
PHONOCHAIL	TE LE 25500	JACKSONVILLE FL 32205				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 12/01/1996		
2. Principal F	Place of Business	2a, Mailing Address	2a, Mailing Address			4. FEI Number Applied Fo		
21		26				65-1670407 Not Applic		
		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Addition		
22		27				5. Certificate of Status Desired Fee Required		
	te	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28	T			Trust Fund Contribution		
Zip	Country	Zip		intry		8. This corporation owes or has paid the current year Intangible		
24	25	29	30]	ı		Personal Property Tax due June 30. Yes You No.  10. Name and Address of New Registered Agent		
	9 Name and Address of Currer	ir uafistatan Affaut		81 N	Vame	10. Haille sun wonless of Haw Registered Agent		
	EPPER, EDWARD M JR			["] '	ACTUO			
	15 MCPHERSON ROAD			82 Street Address (P.O. Box Number is Not Acceptable)				
JACKȘONVILLE FL 32205				83				
				63				
				84 (	City	B5 Zip Code		
<u> </u>				<u> </u>				
agent la	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, F	s authorize Florida Stat	d by th lutes.	e corporation	oration submits this statement for the purpose of changing its register ion's board of directors. I hereby accept the appointment as register		
SIGNATURE	Signature, typed or printed name of registered ag-	or Lang life if applicable (NO	D1E : Registere	d Agent s	ionature require	ed when reinstating) DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	DELETE	1.1 TI	TLE		☐ Change ☐ Ad		
NAME	REPPER, EDWARD M SR		12 N	4ME				
STREET ADDRESS	5115 MCPHERSON ROAD		135	REET ADI	DRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32205		1.4 CI	TY-ST-Z	iP			
TITLE	PTD	☐ DELETE	2.1 TI			Change Ad		
NAME	REPPER, TIMOTHY M		22 N	AME		•		
STREET ADDRESS	8470 COLFAX COURT		2351	REET ADI	DRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32244		1	ITY-ST-	ŀ	. *		
TITLE	VD	DELETE	3 1 T			☐ Change ☐ Ad		
NAME	<b>RE</b> PPER, EDWARD M JR		3 2 N	AME	ŀ			
STREET ADDRESS	\$266 POPPY DRIVE		3.3 ST	rreet adi	DRESS			
City-ST-ZIP	JACKSONVILLE FL 32205		1	1TY - ST - 2				
TITLE	8D	☐ DELETE	4 1 TI			☐ Change ☐ Ad		
NAME	REPPER, THOMAS M		4. 2 N	IAME				
STREET ADDRESS	8453 COLFAX COURT			REET ADI	DRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32244			TY-\$1-Z				
TITLE		DELETE	5.1 TI			☐ Change ☐ Adi		
NAME		•	5.2 N					
STREET ADDRESS				REFT ADI	DRESS			
CITY-ST-ZIP				TY-\$1-Z				
TITLE		DELETE	6.1 TI			☐ Change ☐ Adi		
		peccit				E stange E ru		
NAME CONSERVADO COO			6.2 N/		DOLCC.			
STREET ADDRESS			- 1	IREET ADI				
CITY-ST-ZIP	Ī		6.4 C	TY-ST-7	iP			

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 changed, or on an attachment with an address.

4-28-98