

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Florida S. Norman
Secretary of State
DIVISION OF CORPORATIONS

95 MAR 23 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 167841 (6)

1. Corporation Name

MARINE ENTERTAINMENT CONSULTANTS, INC.

Principal Place of Business

3195 PONCE DE LEON BLVD
C/O MICHAEL S BROWN
CORAL GABLES FL 33134

Mailing Address

3195 PONCE DE LEON BLVD
C/O MICHAEL S BROWN
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/26/1952

3a. Date of Last Report

04/14/1994

4. FEI Number

59-0673901

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

24. Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28. Zip

Country

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

BROWN, MICHAEL, S
3195 PONCE DE LEON BLVD
MIAMI FL 33134

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VST
BROWN, MICHAEL S.
3195 PONCE DE LEON BLVD
CORAL GABLES FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
HERTZ, ARTHUR H.
3195 PONCE DE LEON BLVD
CORAL GABLES FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(M), 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 a statement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF DOMING OFFICER OR DIRECTOR

Michael S. Brown

Date

Daytime Phone #



167841

P.O. BOX 141809
CORAL GABLES, FLORIDA 33114-1809
Telephone: (305) 529-1414
Facsimile: (305) 529-1456

AMT
Enterprises, Inc.

March 9, 1995

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Document #176396 - 1995 Annual Report
Marine Exhibition Corporation

Gentlemen:

Please add the following to the above mentioned document:

Title: President
Name: George Boucher
Street Address: 3195 Ponce de Leon Blvd.
City-St-Zip: Coral Gables, FL 33134

Title: Vice President & Controller
Name: Ana M. Toledo
Street Address: 3195 Ponce de Leon Blvd.
City-St-Zip: Coral Gables, FL 33134

Sincerely,

Ana M. Toledo
Vice President, Finance

AMT/is