2005 FOR PROFIT-CORPORATION ANNUAL REPORT

DOCUMENT # 176396

MARINE EXHIBITION CORPORATION

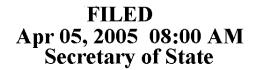


Principal Place of Business

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

03092005 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number 59-0713782 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

305-529-1414

6. Name and Address of Current Registered Agent

SIGNATURE: Michael S. Brown
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

MICHAEL S. BROWN 3195 PONCE DE LEON BLVD CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	ing \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-SY-ZIP	DCC HERTZ, ARTHUR H. 3195 PONCE DE LEON BLVD CORAL GABLES, FL		<u> </u>	- .000000288668 04/05/05-80018-018 150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSCD BROWN, MICHAEL S. 3195 PONCE DE LEON BLVD CORAL GABLES, FL	-	<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DF MOODY, SHERRYL K 3195 PONCE DE LEON BLVD CORAL GABLES, FL		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY - ST-ZIP	VC TOLEDO, ANA M 3195 PONCE DE LEON BLVD CORAL GABLES, FL 33134		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				~
TITLE NAME STREET ADDRESS CITY-ST-ZIP				······································
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				