

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

**FILED**

**May 01 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 365631 (1)**  
1. Corporation Name  
**MARITIME TRANSPORT DEVELOPMENT CORP.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>2200 ELLER DRIVE % GENE DOUGLAS, P.O. BOX 13038 FT. LAUDERDALE FL 33316</b>	Mailing Address <b>2200 ELLER DRIVE % GENE DOUGLAS, P.O. BOX 13038 FT. LAUDERDALE FL 33316</b>
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3. Date Incorporated or Qualified  
**06/15/1970**

2. Principal Place of Business <b>21 701 SE 24th St.</b> Suite, Apt. #, etc.	2a. Mailing Address <b>26 P.O. Box 13133</b> Suite, Apt. #, etc.
22 City & State <b>23 Ft. Laud., FL</b>	27 City & State <b>28 Ft. Laud., FL</b>
24 Zip <b>33316</b>	25 Country <b>USA</b>
29 Zip <b>33316</b>	30 Country

4. FEI Number  
**59-1295222**

Applied For	<input type="checkbox"/>
Not Applicable	<input type="checkbox"/>

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 owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**GENE DOUGLAS  
2200 ELLER DRIVE  
FORT LAUDERDALE FL 33316**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	<b>c/o Hans J. Hvide @ Eller</b>
83	<b>701 SE 24th Street</b>
84 City	<b>Ft. Laud. FL</b>
85 Zip Code	<b>33316</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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>HVIDE, J ERIK</b>	
STREET ADDRESS	<b>2200 ELLER DRIVE</b>	
CITY-ST-ZIP	<b>FT LAUDERDALE, FL 0</b>	
TITLE	<b>SV</b>	<input type="checkbox"/> DELETE
NAME	<b>DOUGLAS, GENE</b>	
STREET ADDRESS	<b>2200 ELLER DRIVE</b>	
CITY-ST-ZIP	<b>FT LAUDERDALE, FL 0</b>	
TITLE	<b>CD</b>	<input type="checkbox"/> DELETE
NAME	<b>HVIDE, HANS J</b>	
STREET ADDRESS	<b>2200 ELLER DRIVE</b>	
CITY-ST-ZIP	<b>FT LAUDERDALE, FL 0</b>	
TITLE	<b>DTV</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>BLANKLEY, JOHN</b>	
STREET ADDRESS	<b>2200 ELLER DRIVE</b>	
CITY-ST-ZIP	<b>FT.LAUDERDALE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>701 SE 24th St.</b>
2.4 CITY-ST-ZIP	<b>Ft. Laud., FL 33316</b>
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	<b>701 SE 24th St.</b>
3.4 CITY-ST-ZIP	<b>Ft. Laud., FL 33316</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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

SIGNATURE \_\_\_\_\_ **3/20/98**

CR2E034 (10/97)