

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

FILED

Jan 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 426500 (5)

1. Corporation Name
PATTON MARINE, INC.

Principal Place of Business

2120 S BAYSHORE DR
COCONUT GROVE FL 33133

Mailing Address

2120 S BAYSHORE DR
COCONUT GROVE FL 33133

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	S/B	Applied For
21 2225 SW 25th AVENUE	26 P. O. BOX 451135	05/23/1973	X50478247X	59-1460604	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22	27	6. Election Campaign Financing	\$5.00 May Be Added to Fees		
City & State	City & State	Trust Fund Contribution			
23 MIAMI FLORIDA	28 MIAMI FLORIDA	8. This corporation owes or has paid the current year Intangible			
Zip	Zip	Personal Property Tax due June 30.	Yes No		
24 33145	25 DADE	29 33245	30 DADE		
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			

PATTON, DONALD M.
2120 S. BAYSHORE DRIVE
MIAMI FL 33133

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
2225 SW 25th AVENUE
83 MIAMI FLORIDA 33145
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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	
NAME	PATTON, MARYSOL	1.2 NAME	
STREET ADDRESS	2120 S. BAYSHORE DRIVE	1.3 STREET ADDRESS	2225 SW 25th AVENUE
CITY-ST-ZIP	MIAMI, FL 00000	1.4 CITY-ST-ZIP	MIAMI FLORIDA 33145
TITLE	P	2.1 TITLE	
NAME	PATTON, DONALD M	2.2 NAME	
STREET ADDRESS	2120 S. BAYSHORE DRIVE	2.3 STREET ADDRESS	2225 SW 25th AVENUE
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI FLORIDA 33145
TITLE	ST	3.1 TITLE	
NAME	JONES, A THOMAS	3.2 NAME	
STREET ADDRESS	11223 S.W. 114TH LANE CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-98

305-854-3821

Date

Daytime Phone #

0267522

CP2E034 (10/97)