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

FILED
May 19 1998 8:00am
Secretary of State

DOCUMENT # 509313 (3)

1. Corporation Name
UNITED MARINE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
490 N.W. S. RIVER DRIVE MIAMI FL 33128 US	490 NE S RIVER DR MIAMI FL 33128 US

2. Principal Place of Business 21	2a. Mailing Address 26 490 NW SouthRiver Dr.	3. Date Incorporated or Qualified 07/12/1976
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1686369 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 / Country 25	Zip 29 / Country 30	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	10. Name and Address of New Registered Agent
BAILEY, JOHN R 9700 SO. DIXIE HWY., SUITE 570 MIAMI FL 33156	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 reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DTC	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BAILEY, GUY B.		1.2 NAME	
STREET ADDRESS	490 N.W. S. RIVER DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	
TITLE	P	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SCARBOROUGH, GARY E		2.2 NAME	
STREET ADDRESS	490 N.W. S. RIVER DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	
TITLE	S	☒ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MALCOLM, VI K.		3.2 NAME	
STREET ADDRESS	2699 S.BAYSHORE DR,#800A		3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP	
TITLE	DV	☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	BAILEY, JOHN R.		4.2 NAME	
STREET ADDRESS	3784 1 BISCYANE TOWER		4.3 STREET ADDRESS	9700 So. Dixie Hwy. Suite 570
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	MIAMI FL 33156
TITLE	D	☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	BABCOCK, MARY		5.2 NAME	
STREET ADDRESS	2699 S.BAYSHORE DR,#800A		5.3 STREET ADDRESS	9700 So. Dixie Hwy. Suite 570
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP	MIAMI FL 33156
TITLE	D	☐ DELETE	6.1 TITLE	☒ Change ☐ Addition
NAME	BAILEY, PATRICIA E		6.2 NAME	
STREET ADDRESS	2699 SOUTH BAYSHORE 800A		6.3 STREET ADDRESS	9700 So. Dixie Hwy. Suite 570
CITY-ST-ZIP	MIAMI FL		6.4 CITY-ST-ZIP	MIAMI FL 33156

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: [illegible]

CR2E034 (10/97)