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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 553650 1. Corporation Name

MARINE BAR, INC.

FILED Jan 23, 1999 8:00am **Secretary of State**

01-23-1999 90044 033 ***150.00



Principal Plac	e of Business	Mailing Address				
8301 S.W. 148	DRIVE	8301 S.W. 148 DRIVE				
MIAMI FL 33158		MIAMI FL 33158			DO NOT WRITE IN THIS SPACE	
					Date Incorporated or Qualifed	
					09/22/1977	
	(0)	2a Mailing Addrona			4. FEI Number Applied For	
一 ・	lace of Business	— <u> </u>	2a. Mailing Address			
21		26			00 11 7 1000	
Suite, Apt. #, etc.		— — · · · ·	Suite, Apt. #, etc.		5. Certificate of Status Desired	
22		27	<u> </u>			
City & State		<u>⊢</u> -₁ ′	City & State		6. Election Campaign Financing \$5.00 May Be	
23		 	Zip Country		Trust Fund Contribution Added to Fees	
Zip	Country	Zip		untry	8. This corporation owes the current year Intangible Personal Property Tax.	
24	25	29	30	1	. Steel and the party of the pa	
	9. Name and Address of Cur	rent Registered Agent		81 Name	10. Name and Address of New Registered Agent	
DI A	VE LADDY			Name		
	KE, LARRY			82 Street Add	fress (P.O. Box Number is Not Acceptable)	
8301 S.W. 148 DRIVE						
MIA	MI FL 33158	•		83		
				84 City	85 Zip Code	
				0,	FL '' -	
agent. I a SIGNATURE	ım familiar with, and accept the ob				ed when reinstating) DATE	
40	Signature, typed or printed name of registered		13.	d Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.		AND DIRECTORS		ITLE I	Change Addition	
TITLE	PS LANG LABOY			1	, company	
NAME	BLAKE, LARRY			IAME		
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33158			ITY-ST-ZIP	☐ Change ☐ Addition	
TITLE		☐ DELETE	l l	ITLE		
NAME			2.2 N	IAME		
STREET ADDRESS			2.3 5	TREET ADDRESS	•	
CITY-ST-ZIP				CITY-ST-ZIP		
TITLE 5.		- DELETE	3.11	TILE	☐ Change ☐ Addition	
NAME			3.2 N	AME		
STREET ADDRESS			3.3 8	TREET ADDRESS		
CITY-ST-ZIP		•	3.4.	CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 1	TILE	· Change	
NAME			4. 2	NAME		
STREET ADDRESS			4.3 5	TREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP	•	
TITLE		☐ DELETE		TTLE	☐ Change ☐ Addition	
NAME				IAME		
			1	TREET ADDRESS		
STREET ADDRESS	P. 1			CITY-ST-ZIP		
CITY-ST-ZIP		☐ DELETE		ITLE	☐ Change ☐ Addition	
TITLE	3			IAME	C compa	
NAME				TREET ADDRESS		
STREET ADDRESS				CITY-ST-ZIP		
			E 6 4 /	1114 CT 71D		

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 address, with all other like empowered.

SIGNATURE: