

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

FILED
May 01 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 # 565505 (5)
1. Corporation Name
HVIDE MARINE INTERNATIONAL, INC.



Principal Place of Business 2200 ELLER DRIVE P.O. BOX 13038 FORT LAUDERDALE FL 33316	Mailing Address 2200 ELLER DRIVE P.O. BOX 13038 FORT LAUDERDALE FL 33316
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/23/1978	
21		26		4. FEI Number 59-1789754	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

DOUGLAS, GENE
2200 ELLER DR.
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWEENEY, EUGENE	1.2 NAME	
STREET ADDRESS	2200 ELLER DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANKLEY, JOHN	2.2 NAME	
STREET ADDRESS	2200 ELLER DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL 0	2.4 CITY-ST-ZIP	
TITLE	CPD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HVIDE, J ERIK	3.2 NAME	
STREET ADDRESS	2200 ELLER DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL 0	3.4 CITY-ST-ZIP	
TITLE	VS	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DOUGLAS, GENE	4.2 NAME	Andrew W. Brauninger
STREET ADDRESS	2200 ELLER DR.	4.3 STREET ADDRESS	2200 Eller Drive
CITY-ST-ZIP	FT. LAUDERDALE, FL 0	4.4 CITY-ST-ZIP	Ft. Lauderdale, FL. 33316
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Asst. S Christopher D. Strong
STREET ADDRESS		5.3 STREET ADDRESS	2200 Eller Drive
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Ft. Lauderdale, FL. 33316
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: _____

(054) 524-4200

CR2E034 (10/97)