

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

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90041 028 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 565505

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**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25

2a. Mailing Address
 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

3. Date Incorporated or Qualified
01/23/1978

4. FEI Number
59-1789754

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 the current year Intangible Personal Property Tax. Yes 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 **ROBERT B. LAMM**
 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: DATE: **4/22/99**

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	SWEENEY, EUGENE	
STREET ADDRESS	2200 ELLER DR.	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	VDT	<input type="checkbox"/> DELETE
NAME	BLANKLEY, JOHN	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 0	
TITLE	CPD	<input type="checkbox"/> DELETE
NAME	HVIDE, J ERIK	
STREET ADDRESS	2200 ELLER DR.	
CITY-ST-ZIP	FT. LAUDERDALE, FL 0	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BRAUNINGER, ANDREW W	
STREET ADDRESS	2200 ELLER DR.	
CITY-ST-ZIP	FT. LAUDERDALE, FL 0 33316	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	STRONG, CHRISTOPHER D	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FT LAUDERDALE FL 33316	
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 type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
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, with all other like empowered.

SIGNATURE: DATE: **4/22/99** (954) 524-4200 x800

CR2E034 (1/98)