

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # 569569 1. Entity Name SEABULK TRANSMARINE II, INC.	
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Principal Place of Business 2200 ELLER DRIVE P.O. BOX 13038 FT LAUDERDALE, FL 33316	Mailing Address P.O. BOX 13038 ATTN: LEGAL DEPT FT LAUDERDALE, FL 33316
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04192004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1835095	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TWAITS, ALAN R 2200 ELLER DRIVE BLDG 27 FORT LAUDERDALE, FL 33316

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstalling) _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CPCD KURZ, GERHARD E 2200 ELLER DR. FT LAUDERDALE, FL, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVD TWAITS, ALAN R 2200 ELLER DR. FT. LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVTD DESOTOA, VINCENT J 2200 ELLER DR. FT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD FINCH, STEPHEN B JR 2200 ELLER DR. FT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SV FRANCOIS, LARRY D 2200 ELLER DR. FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen B. Finch **Stephen B. Finch**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Vice President** **4/19/04** **954-523-2200**
Date Daytime Phone #