FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State

1	1996	100000	DIVISION OF	CORPORAT	TIONS			
DOCUN 1. Corporation	MENT #	586031	(7)					
	LEY MARINE, INC	CORPORATED				4 200/01 0/464 10/40 00/10 00/10 00/10	ada mak dadan dadan dadan	Arder Arder divis 1661
Principal Place		Mai	ling Address					
93 DELANN COCOA FL			93 DELANNOY AVEN COCOA FL 32922	IUE				
						3. Date Incorporated or Qualified 09/12/1978	3a. Date of Last 04/25/	' [
2. Principal Pla	ice of Business	Mailing Address			4. FEI Number Applied For S9-1839568 Not Applied be		Applied For	
Suite, Apt. #	r, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fe's Required		75 Additional
City & State		<u> </u>	City & State			6. Election Campaign Financing	\$5.	.00 May Be
23 Zip	Countr	28	Zip Country			8. This corporation has liability for intangible tax under s 199.032,		
24	25	29 ess of Current Regist	ered Anent	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	g, Hame and Addre	sas or our ent riogist	ereo Agent	8	1 Name	10. Nume and Address of Now 1	tograteroo Agent	
WHITLEY, JOSEPH B.					2 Street Add	ress (P.O. Box Number is Not Acceptal	ole)	
	.annoy avenue 4, florida DM 329	22		-	3			
COCOF	A, FLORIDA DIVI 328	22			4 City		85	Zip Code
							FL	
or registere	ed agent, or both, in the	State of Florida. Such	change was authoriz	ted by the co	e-named corpo rporation's boa	ration submits this statement for the pu ird of directors. I hereby accept the app	rpose of changing it ointment as register	s registered office and agent. I am
SIGNATURE	h, and accept the obliga	ations of, Section 607.0	505, Florida Statutes	s.				
	Signature, typod or printeo name		_ · · · · · · · · · · · · · · · · · · ·	OTE Registered A	gont signature require	i	DATE	TODE IN 10
12.	PD	OFFICERS AND DIRECT	DELETE 1		E	ADDITIONS/CHANGES TO OFF	CERS AND DIREC	
NAME	WHITLEY, JOSE	PH B.		1.2 NAM	E			
STREET ADDRESS	93 DELANNOY	AVE.			EET ADDRESS			
CITY-ST-ZIP TITLE	COCOA FL STD		DELETE	14 CITY 2 1 TITE	-ST-ZIP		☐ Chang	e Addition
NAME	WHITLEY, DIAN	E P.	_ occirc	2 2 NAM			والقالة ال	
STREET ADDRESS	93 DELANNOY		23		ET ADDRESS			
C(TY+ST-ZIP	COCOA FL				-ST-ZIP			
HILE			☐ DEFELF	3 1 TITE 32 NAM			_ Chang	a Addition
NAME STREET ADORESS					EET ADDRESS			:
City-S1-ZiP					-S1-7IP			
TITLE			☐ DELETE	4 1 TITU	E		Chang	Addition
NAME				4.2 NAM				
STREET ADDRESS					EET ADDRESS			
CITY-ST-ZIP			☐ DELETE	5 1 TITL	-ST-ZIP E		☐ Chang	Addition
NAME			_ -	5.2 NAM				
STREET ADDRESS				5 3 STRI	EET ADDRESS			
CITY - ST - ZIP			F) Driver		-ST-ZIP		F A	, The desired
TILE			DELETE	6. 1 TIT: 6.2 NAM			Chang	e Addition
NAME STREET ADDRESS					EET ADDRESS			
CITY-ST-ZIF					-\$1-ZIP			
14. I do hereby				nished and de	pes not qualify t	for the exemption stated in Section 119 ate and that my signature shall have the		
oath; that I appears in	I am an officer or director Block 12 or Block 3 if	or of the corporation or y langed or un by any	the receiver or truste observent with an add	e empowere ress.	d to execute th	ate and that my signature shall have the is report as required by Chapter 607, F	orida Statutes; and	that my name
SIGNAT		4	/ \	,		i Tley 4-10-96		I
	/							