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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 639446

Principal Place of Business

4710 NW 2ND AVE

(4)

Mailing Address

4710 NW 2ND AVE

JAMESTOWN METAL MARINE SALES, INC.

FILED Jan 20 1998 8:00am Secretary of State

BOCA RATON FL 39431 BOCA BATON FL 39431	SUITE 400		SUITE 400				DO NOT WOLTE IN THE COM	.05		
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Personal Property Tax due June 30. No.		Country		Country						
HAZARD, EDWARD W. 4710 NW 2ND AVE BOCA RATON FL 33431 181 Simet Address (P.O. Box Number is Not Acceptable) 182 Street Address (P.O. Box Number is Not Acceptable) 183 Simet Address (P.O. Box Number is Not Acceptable) 184 City FL 85 Zip Code 185 City FL 85 Zip Code 186 City FL 85 Zip Code 187 Pursuant to the provisions of Sections 607.0502 and 807.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered differs or registered agent, or both, in the State of Florids. Such charge was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent and in a member with, and except the obligation of, Section 607.0505, Plorids Statutes. SIGNATURE Signature system yeard or printed save of registered agent are displaced agent and special registered agent agent are specially agent and printed save of registered agent agent are specially agent and special registered agent agen	24	25	29							
TAZARD, EDWARD W. JR. APTO NW 2ND AVE BOCA RATON FL 33431 88 Street Address (P.O. Box Number is Not Acceptable) 89 Gity FL 80 Street Address (P.O. Box Number is Not Acceptable) 80 81 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 Gity FL 85 Stp Code 11. Pursuant to the provisions of Sections 607.0502 and 507.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby scoept the appointment as registered agent in manufacture, in a manufacture agent and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby scoept the appointment as registered agent in manufacture registered when represented when represente	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
### Street Address (P.O. Box Number is Not Acceptable) ### Street Address (P.O. Box Number is Not Acceptable) ### Street Address (P.O. Box Number is Not Acceptable) ### City HA	ZARD, EDWARD W.		81	I N	Vame					
BOCA RATON FL 33431 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 807.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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 of the purpose of changing its registered of the purpose of changing its registered agent, or both, in the State of Florida, Statutes. SIGNATURE Signature typed or printed name of registering agent and site if rephtable. [NOTE Registered Agent algrance required when removaling). DATE 12. OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ITILE 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHAN				99 Ctrant Add			co (P.O. Boy Number in Not Acceptable)			
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11. Pursuant to the provisions of Sections 607 (502 and 607 (1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607 (505, Florida Statutes.) SIGNATURE SIGNATURE TILE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILE OFFICERS AND DIRECTORS 11. TITLE DELETE 11. TITLE DELETE 11. TITLE P OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 STREET ADDRESS GITY-S1-ZIP BOCA RATON, FL. 00000 14. GITY-S1-ZIP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P OCHANGE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P DELETE 2.1 TITLE Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIR				83	3					
11. Pursuant to the provisions of Sections 607 (502 and 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE				84	10	Dity	E [8	5 Zip	Code	
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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	·		,			ļ			J	
	14. I hereby o	ertify that the information supplied with	this filing does not qualify for the	ne exemp	tion	stated in Se	ection 119.07(3)(i), Florida Statutes. I further certify	that the	information	

upplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address.