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Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90081 024 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 640843

1. Corporation Name

MARINE PERSONNEL SERVICES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2200 ELLER DR.
% GENE DOUGLAS, PO BOX 13038
FORT LAUDERDALE FL 33316

2200 ELLER DR.
% GENE DOUGLAS, PO BOX 13038
FORT LAUDERDALE FL 33316

3. Date Incorporated or Qualified

09/07/1979

4. FEI Number

59-1939320

Applied For

Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOUGLAS, GENE
2200 ELLER DR.
FORT LAUDERDALE FL 33316

81 Name GERALD FARMER

82 Street Address (P.O. Box Number is Not Acceptable)
2200 ELLER DRIVE

83 P.O. BOX 13038

84 City FORT LAUDERDALE

FL 85 Zip Code 33316

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

03/08/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE

1.1 TITLE Change Addition

NAME HVIDE, J ERIK
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FT LAUDERDALE, FL 00000

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DELETE

2.1 TITLE Change Addition

NAME FARMER, GERALD
STREET ADDRESS 6711 N. OCEAN BLVD #8
CITY-ST-ZIP OCEAN RIDGE FL 33435

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DELETE

3.1 TITLE Change Addition

NAME DOUGLAS, GENE
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FT LAUDERDALE, FL 00000

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE

4.1 TITLE Change Addition

NAME FARMER, LORRAINE
STREET ADDRESS 6711 N. OCEAN BLVD #8
CITY-ST-ZIP OCEAN RIDGE FL 33435

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE

5.1 TITLE Change Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE

6.1 TITLE Change Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/08/99

Date

Daytime Phone #

CR2E034 (1/1/98)