

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 652608

(1)

1. Corporation Name

J.C.'S MARINE SERVICE, INC.



Principal Place of Business

6231 SW 186TH WAY
FORT LAUDERDALE FL 33332

Mailing Address

6231 SW 186TH WAY
FORT LAUDERDALE FL 33332

3. Date Incorporated or Qualified
12/20/1979

3a. Date of Last Report
02/14/1995

2. Principal Place of Business

21 801 NE 3 ST

2a. Mailing Address

26 SAME

4. FEI Number
59-1966383

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

City & State

23 DANIA, FL

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

Zip

County

24 33004

25 BROWARD

Zip

Country

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TURNER, JEFFERY C.
6231 SW 186TH WAY
FORT LAUDERDALE FL 33332

81 Name

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

Signature of Registered Agent (if not the same as the corporation's)

NOTE: Registered Agent signature required when restate.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ DELETE

NAME
PD
TURNER, JEFFERY C
STREET ADDRESS
6231 SW 186TH WAY
CITY-ST-ZIP
FT LAUDERDALE, FL 00000

1.1 TITLE ☐ Change ☐ Addition

2. TITLE ☐ DELETE

NAME
ST
TURNER, CARLA
STREET ADDRESS
6231 SW 186TH WAY
CITY-ST-ZIP
FT LAUDERDALE, FL 00000

2.1 TITLE ☐ Change ☐ Addition

3. TITLE ☐ DELETE

NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

4. TITLE ☐ DELETE

NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

5. TITLE ☐ DELETE

NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

6. TITLE ☐ DELETE

NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

7. TITLE ☐ DELETE

NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

7.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Carla Turner* CARLA TURNER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/96

954-942-3333

Date

Daytime Phone #

CR2E034 (12/95)