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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 694797

(2)

M. I. T. MARINE ELECTRIC CORP.

FILED
May 12 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address										
	A MINING BLVD LE FL 32257-1178		9410 FLORIDA MINING BLVD JACKSONVILLE FL 32257-1178							
							3. Date Incorporated or Qualified 07/01/1981	•	te of Last R 01/1996	,
2. Principal F	Place of Business	2a. Ma	iling Address	***			4. FEI Number	-t		pplied For
21]		26				59-2118930				
Suite_Apt 22	# etc.	27 Su	ite, Apt. #, etc-				5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & Sta	le .	Cit	y & State				6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Zφ	Country	Zir)	Cou	ntry		8. This corporation has liability for i			. 199.032,
4	25	29		30		· · · · · · · · · · · · · · · · · · ·		Yes _		
	9. Name and Address of Cu	rrent Hegistere	a Agent		81	Name	10. Name and Address of New Re	gistered A	gent	
	LEN, BRINTON & SIMM				91	Name				
	00 INDEPENDENT SQUARE IITE 300		82 Street A		Street Add	dress (P.O. Box Number is Not Acceptab	le)			
	CKSONVILLE FL 32202				83					
				j	84	City			85 Zip	Code
				1		<u></u>	rporation submits this statement for the p	FL		
SIGNATURE	ant familiar with, and accept the o		plicable (NC	OTE Registered			ared when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDC AND	DIRECTOR	C IN 12
12.	VS	AND DIRECTO	DELETE	13. 1.1 Til	n E		ADDITIONS/CHANGES TO OFFIC		Change	Additio
TITLE NAME	KOKKINOS, IRENE		f Dectair	1.2 NA				'	Criange	L., Addition
nimme Street address	ALLA PLANICA LINKIA NI	vn				ADDRESS				
ainer i nuuneaa. Ödy-St-ZiP	JACKSONVILLE,FL 00000			4		ST-ZIP				
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NAME	KOKKINOS, MICHAEL T			2.2 NA	ME					
SUREEL ADDRESS	ALLA PLANINA MININA NI	.VD		2.3 \$1	REET	ADDRESS				
City+SI+7iP	JACKSONVILLE, FL 00000)		2. 4 C	(TY-S	ST-ZIP		•		
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NAMI Paris Laurini de				52 NA		ADDOCCO				
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NAME			based south the	6.2 N					- 10.170	
STREET ADORESS						ADDRESS				
CHY-ST-Zif				l l		ST-ZIP				
	by certify that the information sur	plied with this f	iling does not qua				ed in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the

To hereby certify that the information supplied with this hing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. From the certify that the information undicated 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 it 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

42397

262.3300