2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 8:00 am
Secretary of State

05-24-2001 90004 028 ****61.25

660324

DO NOT WRITE IN THIS SPACE

DOCUMENT # 730236

1. Entity Name

AMERICAN INSTITUTE OF MARINE STUDIES, INC.

Principal Place of Business	Mailing Address
~~2810 CARLETON ST.~~ SAN DIEGO CA ~~92106~~	C/O 200 SE 18TH CT. FORT LAUDERDALE FL 33316

2. Principal Place of Business	3. Mailing Address
11985 CANERIDGE RD	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip 92128 / Country	Zip / Country

4. FEI Number 23-7391668 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TOBIN, RICHARD 200 SE 18TH CT. FORT LAUDERDALE FL 33316	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D ☒ Delete	TITLE	D ☐ Change ☒ Addition
NAME	BERZINON, HECTOR	NAME	DAVID McMULLEN
STREET ADDRESS	2160 ROSEWOOD DR.	STREET ADDRESS	11985 CANERIDGE RD
CITY-ST-ZIP	SAN BRUNO CA 94066	CITY-ST-ZIP	SAN DIEGO CA 92128
TITLE	D ☒ Delete	TITLE	D ☐ Change ☒ Addition
NAME	ROSS, JOSHUA J	NAME	SAL GALLUCCI
STREET ADDRESS	4851 73 ST.; NO. 11	STREET ADDRESS	11985 CANERIDGE RD
CITY-ST-ZIP	LA MESA CA 91941	CITY-ST-ZIP	SAN DIEGO CA 92128
TITLE	D ☒ Delete	TITLE	D ☐ Change ☒ Addition
NAME	BERNINZON, ESPERONZA	NAME	ALLEN SCHWARTZ
STREET ADDRESS	3900 GAULT OCEAN DR., APT. 305	STREET ADDRESS	11985 CANERIDGE RD
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	CITY-ST-ZIP	SAN DIEGO CA 92128
TITLE	D ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	MEYER, GALE	NAME	
STREET ADDRESS	708 SW 14TH TERR	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David McMullen

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER

CR2E037 (10/00)