2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 762347 Apr 26, 2000 8:00 am Secretary of State 1. Entity Name SHIP 307, INC. 04-26-2000 90081 016 ****61.25 Principal Place of Business Mailing Address % ROBERT WORTHMAN % ROBERT WORTHMAN 7677 COURTYARD RUN WEST 7677 COURTYARD RUN WEST **BOCA RATON FL 33433** BOCA RATON FL 33433-3007 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2198276 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LEASOR (JOHN E.) 726 SOUTH LAKE AVENUE DELRAY BEACH, 33483 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. ☐ Change **Addition** 🔀 Delete TITLE TITLE MROZ, RICK NAME NAME EKLE, BARRY 4401 NW 3RD AVE STREET ADDRESS STREET ADDRESS 480 NE 55 TERR BOCA RATON, FL 33431 CITY-ST-ZIP CITY-ST-ZIP miami fl. ☐ Change Addition 💢 Delete TITLE TITLE מ BOWES, BILL NAME NAME DUROCHER, DAVID 6503 AMBERWOODS DR STREET ADDRESS STREET ADDRESS 6844 PALMETTO CIR S 203 CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33433 Addition ☐ Delete TITLE ... Change TITLE. PD · NAME WORTHMAN, ROBERT NAME STREET ADDRESS STREET ADDRESS 7677 COURTYARD RUN WEST CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Change ☐ Delete ☐ Addition TITI F TITLE NAME NAME MURRAY, RICHARD STREET ADDRESS STREET ADDRESS 575 NW 13TH AVENUE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Addition X Delete ☐ Change TITLE TITLE LEASOR, JOHN 726 SOUTH LAKE AVE NAME MAME GOFF, DAVE STREET ADDRESS STREET ADDRESS 761 NE MARINE DR DELRAY BEACH, FL 33483 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON, FL 0** ☐ Change TITLE Delete TITLE HAINS, DREW 2059 SW 15th ST, Apt # 227 NAME MARTINO, MARNA STREET ADDRESS STREET ADDRESS 9715 ARBOR OAKS ALNE APT 102 CITY-ST-ZIP DEERAELD BEACH, FL 33442 CITY-ST-ZIP **BOCA RATON FL 33428** 12. I hereby certify that the information supplied with this filling 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 people as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

changed, or on an attachment with

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/00

561-367-860

Daytime Phone #