2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005846

Title:

Name:

Address: City-St-Zip: FILED Apr 28, 2008 Secretary of State

Entity Name: GULF MARINE & INDUSTRIAL SUPPLIES, INC. **Current Principal Place of Business:** New Principal Place of Business: 401 ST. JOSEPH STREET 5582 COMMERCIAL BLVD NEW ORLEANS, LA 70130 WINTER HAVEN, FL 33880 US **Current Mailing Address: New Mailing Address:** 401 ST. JOSEPH STREET 5501JEFFERSON HWY NEW ORLEANS, LA 70130 HARAHAN, LA 70123 US FEI Number: 72-0578340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TIM, TOWNSEND 5582 COMMERCIAL BLVD WINTER HAVEN, FL 33880 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition COTSORADIS, BRILLE COTSORADIS, BRILLE Name: Name: 285 CITRUS RD 285 CITRUS RD Address: Address: City-St-Zip: RIVER RIDGE, LA 70123 City-St-Zip: RIVER RIDGE, LA 70123 VC Title: Title: () Delete (X) Change () Addition COTSORADIS, STEPHEN J Name: COTSORADIS, STEPHEN Name: 285 CITRUS RD 285 CITRUS RD Address: Address: RIVER RIDGE, LA 70123 RIVER RIDGE, LA 70123 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition P/D COTSORADIS, JOHN R COTSORADIS, JOHN R Name: Name: 14502 RED CREEK COURT 14502 RED CREEK COURT Address: Address: City-St-Zip: HUMBLE, TX 77396 City-St-Zip: HUMBLE, TX 77396 Title: () Delete Title: (X) Change () Addition COTSORADIS, STEPHEN J COTSORADIS, STEPHEN J Name: Name: Address: 285 CITRUS RD Address: 285 CITRUS RD City-St-Zip: City-St-Zip: RIVER RIDGE, LA 70123 RIVER RIDGE, LA 70123

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN COTSORADIS S/T 04/28/2008

() Delete

BAUER, THOMAS J

1030 JENA STREET

NEW ORLEANS, LA 70115

() Change () Addition