

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11168

FILED  
Feb 22, 2005  
Secretary of State

Entity Name: TRANSMISSION MARINE, INC.

## Current Principal Place of Business:

223 SW 33 CT  
C/O O. JOHN RUBIN  
FT. LAUDERDALE, FL 333152113 US

## New Principal Place of Business:

## Current Mailing Address:

223 SW 33 CT  
P.O. BOX 21086  
FT. LAUDERDALE, FL 333351086 US

## New Mailing Address:

P.O. BOX 21086  
FT. LAUDERDALE, FL 333351086 US

FEI Number: 59-2044929

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUBIN, O. JOHN  
223 SW 33 CT  
FT. LAUDERDALE, FL 33315 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: RUBIN, O. JOHN,  
Address: 223 SW 33 CT  
City-St-Zip: FT. LAUDERDALE, FL

Title: ST ( ) Delete  
Name: GERCAK, CLAUDIA,  
Address: 223 SW 33 CT  
City-St-Zip: FT LAUDERDALE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RUBIN, O. JOHN,  
Address: 223 SW 33 CT  
City-St-Zip: FT. LAUDERDALE, FL 33315 US

Title: ST (X) Change ( ) Addition  
Name: GERCAK, CLAUDIA,  
Address: 223 SW 33 CT  
City-St-Zip: FT LAUDERDALE, FL 33315 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: O. JOHN RUBIN

PD

02/22/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date