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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

122 S.W. 54 AVE. PLANTATION FL 33317

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F88503

(0)

Mailing Address

2a. Mailing Address

122 S.W. 54 AVE. PLANTATION FL 33317

ECONOMY MARINE SERVICE, INC.

| FILED | |
|--------------------|---|
| Apr 14 1998 8:00an | 1 |
| Secretary of State | |

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| - | | | | | | | | |
|--|-------------------|--|--|--|--|--|--|--|
| DO NOT WRITE IN THIS | SPACE | | | | | | | |
| 3. Date Incorporated or Qualified 06/28/1982 | | | | | | | | |
| 4. FEI Number | Applied For | | | | | | | |
| 59-2282386 | Not Applicable | | | | | | | |
| 5. Certificate of Status Desired | \$8.75 Additional | | | | | | | |

| ł | | | 26 | | | : | l | 59-2282386 | | Not Applicable | |
|---|---------------------------|--------------------------|------------------|---------------------------------------|-----------|---------------|---|---|----------|-----------------------------------|--|
| , | Suite, Apt. #, etc. | | Suite, Apt. #, | etc. | | | Б. | Certificate of Status Desired | | \$8.75 Additional Fee Required | |
| | City & State | | City & State | | | | 6. | Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees | |
| | Zip | Country 25 | 7ip 29 | 70 Cour | ntry | | | This corporation owes or has pa Personal Property Tax due June | 30. | Yes No | |
| | 9. Name | and Address of Current I | Registered Agent | | | | 10. | Name and Address of New Re- | gistered | d Agent | |
| | | THEODORE J | | · · · · · · · · · · · · · · · · · · · | 81 | Name | | | | | |
| | 122 SW 54TH PLANTATION | • • • • • | | | 82 | Street Addres | Address (P.O. Box Number is Not Acceptable) | | | | |
| | | | | <u> </u> | B3 | | | _ | | | |
| | | | | r | | 0.1 | | | | 1 | |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered

| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | |
|--|------------------------|----------|----------------------|---|--|
| SIGNATURE Signature, typed or printed name of registered eyend and title if applicable INOTE Registered Agent signature required when reinstating) DATE | | | | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | DP | DELETE | 1.1 TITLE | ☐ Change ☐ Addition | |
| NAME | GORALCZYK, THEODORE J | | 1.2 NAME | | |
| STREET ADDRESS | 122 S W 54TH AVE | | 1.3 STREET ADDRESS | | |
| CrTY-ST-ZIP | FT LAUD, FL 00000 | | 1.4 CITY - ST-ZIP | | |
| TITLE | | DELETE | 21 TITLE | Change Addition | |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 2. 4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 3.1 TITLE | Change Addition | |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | · | |
| CITY-ST-ZIP | | | 3.4. CITY - ST - ZIP | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | ☐ Change ☐ Addition | |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 5.1 TITLE | ☐ Change ☐ Addition | |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADORESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 61 TITLE | Change Addition | |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY - ST - ZIP | | |

4 7 1998 954 583 3187
Date Daytime Proce # 0289195