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Feb 09, 1999 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

02-09-1999 90018 042 ***150.00

DOCUMENT # F94000006054

1. Corporation Name
VILLAGE MARINE, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 2000 W. 135TH ST. GARDENA CA 90249
Mailing Address: 2000 W. 135TH ST. GARDENA CA 90249

3. Date incorporated or Qualified: 11/28/1994
4. FEI Number: 95-3899167
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: 21 same as above
2a. Mailing Address: 26 same as above
22 Suite, Apt. #, etc.
23 City & State
24 Zip Country 25 29 30

9. Name and Address of Current Registered Agent
PURCELL, WILLIAM C
633 S. ANDRONS AVE., 3RD FLOOR
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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: _____ DATE: _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	95 0000000
NAME	KERSHAW, ROBERT	1.2 NAME	
STREET ADDRESS	2000 W. 135TH ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	GARDENA CA 90249	1.4 CITY-ST-ZIP	
TITLE	VS	2.1 TITLE	
NAME	KERSHAW, ROBBIE JR	2.2 NAME	
STREET ADDRESS	2000 W. 135TH ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	GARDENA CA 90249	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert R. Kershaw
01-14-99 (310) 516-9911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (11/98)