PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F95000002787**1. Corporation Name

HARRIS MARINE SERVICES, INC.

Principal Place of Business

Mailing Address

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90143 026 ***150.00



3802 CR 513 WILDWOOD FL	34785	3802 CR 513 WILDWOOD FL 34785						
						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed 06/09/1995		
Principal Place of Business 2a. Mailing Address					,	4. FEI Number	Ar	pplied For
21	26					71-0541815	N/	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					•	5. Certificate of Status Desired -		Additional equired
City & State City & State						6. Election Campaign Financing	\$5.00	May Be
23		28	28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip				8. This corporation owes the current year In		<i>N/</i> 性
24 25 29 30						Personal Property Tax.	Yes	□No di
	9. Name and Address of Curr	rent Registered Agent		0.4		10. Name and Address of New Registered	Agent	
	no proco.			81	Name	,		
HARRIS, REBECCA				82	Street Add	iress (P.O. Box Number is Not/Acceptable)		
3802 CR 513				-				
WILD	WOOD FL 34785			83				
					· ·		05 7:-	Code
				84	City	FL	85 Zip	Code
11 Purcuant	to the provisions of Sections 607 (0502 and 607 1508 Florida Statu	tes the al	OOVE	-named corr	poration submits this statement for the purpose of	changing its	s registered
office or n	egistered agent, or both, in the Sta	ite of Florida. Such change was a	uthorized	by t	the corporati	ion's board of directors. I hereby accept the appo	ntment as re	egistered
agent. I a	m familiar with, and accept the obl	igations of, Section 607.0505, Fig	orida Stati	ites.				l
SIGNATURE			- 6			ed when reinstating) DATE		
Ogradia, types at printed trained to eget to the second se					signisture requir	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
12.		DELETE	1,1 TF	n c		Apprincipation with the state of the state o	Change	Addition
TITLE	舞 STC	C DECEIE						
NAME	HARRIS, REBECCA		1.2 NA					ì
STREET ADDRESS	3802 CR 513		1.3 ST	REET	ADDRESS			
CITY-ST-ZIP			ry-st	-ZIP	- Lander - Transport - Control - Con			
TITLE	STO PD	DELETE 2.1		TLE			☐ Change	☐ Addition
NAME	HARRIS, JACK JR 221		2.2 NA	ME				·
STREET ADDRESS			2.3 ST	REET	ADDRESS]
CITY-ST-ZIP			2.4 C	TY-S	T-ZiP	The same of the transfer of the same of th		
TITLE			3.1 TI	ΠE			Change	Addition
NAME			3.2 NA	ME				}
STREET ADDRESS			3.3 ST	REET	ADDRESS			
			3.4. C					
CITY-ST-ZIP TITLE						Change	☐ Addition	
NAME		<u> </u>	4. 2 N				_ •	
					ADDDECC			1
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		— □ SECETE	4 4 CI		r-ZIP	1-11	Change	Addition
TITLE				1 TITLE			□ cuange	
NAME			5.2 NA		1			ļ
STREET ADDRESS					ADDRESS			1
CITY-ST-ZIP			5.4 CI		r-ZIP			
TITLE		☐ DELETE	6.1 TI	TLE			Change	☐ Addition
NAME			6.2 N	ME	İ			
STREET ADDRESS			6.3 ST	REET	ADDRESS			
TARLET ADDITION								

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: