

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90099 037 ***150.00

DOCUMENT # F98000005472

1. Corporation Name

SMIT LAND & MARINE INC.

Principal Place of Business

400 N. SAM HOUSTON PARKWAY E., SUITE 310
HOUSTON TX 77060

Mailing Address

400 N. SAM HOUSTON PARKWAY E., SUITE 310
HOUSTON TX 77060

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1998

4. FEI Number

76-0515115

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$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

Suite, Apt. #, etc.

22 Suite 315

23 City & State

24 Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27 Suite 315

28 City & State

29 Zip

Country

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME KAFFA, KAREL

STREET ADDRESS 400 N. SAM HOUSTON PARKWAY E., SUITE 310

CITY-ST-ZIP HOUSTON TX 77060

TITLE VD ☐ DELETE

NAME ELLIOTT, ROGER C

STREET ADDRESS 400 N. SAM HOUSTON PARKWAY E., SUITE 310

CITY-ST-ZIP HOUSTON TX 77060

TITLE VD ☐ DELETE

NAME HAMEL, ANDRE M

STREET ADDRESS 400 N. SAM HOUSTON PARKWAY E., SUITE 310

CITY-ST-ZIP HOUSTON TX 77060

TITLE SD ☐ DELETE

NAME DRISCOLL, JOHN J

STREET ADDRESS 400 N. SAM HOUSTON PARKWAY E., SUITE 310

CITY-ST-ZIP HOUSTON TX 77060

TITLE GM ☐ DELETE

NAME SMITH, R. N

STREET ADDRESS 400 N. SAM HOUSTON PARKWAY E., SUITE 310

CITY-ST-ZIP HOUSTON TX 77060

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CD ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE PD ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

400 N. Sam Houston Parkway E.
Suite 315

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/05/99

Date

(281) 774-5080

Daytime Phone #

CR2E034 (11/98)