FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 AM 11:16

DOCUMENT # **G21652** **(4)**

1. Corporation Name
I.C.S. MARINE, INC.

Principal Place of Business	Mailing Address
888 N.W. 27 AVENUE P.O. BOX 351794 MIAMI FL 33135	888 N.W. 27 AVENUE P.O. BOX 351794 MIAMI FL 33135

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/03/1983**
3a. Date of Last Report: **10/04/1994**

2. Principal Place of Business (21):
2a. Mailing Address (26):
Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):
City & State (23):
City & State (28):
Zip (24): Country (25):
Zip (29): Country (30):

4. FEI Number: **59-2337094** ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DENNIS, RICHARD A
888 N.W. 27 AVENUE
MIAMI FL 33125

10. Name and Address of New Registered Agent

81 Name: Richard C. Dennis
82 Street Address (P.O. Box Number is Not Acceptable)
83: 888 NW 27 Avenue
84 City: Miami **FL** 85 Zip Code: 33125

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] 03/27/95
(Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CT	11 TITLE	C/D	☒ Change ☐ Addition
NAME	DENNIS, RICHARD A.	12 NAME	William H. Cauley	
STREET ADDRESS	888 N.W. 27 AVE	13 STREET ADDRESS	888 N.W. 27 AVENUE	
CITY ST ZIP	CORAL GABLES FL 33125	14 CITY ST ZIP	Miami, FL 33125	
TITLE	P	21 TITLE	P/D	☒ Change ☐ Addition
NAME	GONZALEZ, ALFONSO J.	22 NAME	Richard C. Dennis	
STREET ADDRESS	5431 S.W. 149TH COURT	23 STREET ADDRESS	888 N.W. 27 AVENUE	
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	Miami, FL 33125	
TITLE	V	31 TITLE	S/D	☒ Change ☐ Addition
NAME	MEDINA, GUSTAVO A.	32 NAME	Lourdes Macin'	
STREET ADDRESS	10361 S.W. 118 ST.	33 STREET ADDRESS	888 NW 27 Avenue	
CITY ST ZIP	MIAMI FL	34 CITY ST ZIP	Miami, FL 33125	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] 03/27/95 (305) 643-8721
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0436063 FP