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

Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90028 007 ***150.00

r. Corporation	MENT # G6417 MARINE, INC.	1					
Principal Place of Business Mailing Address					# INNERITE NORTH AUTOR CLINES CONTROL ATTOC ATTO	il Rifil Albii eleli leel	
4525 30TH ST W 4525 30TH ST W BRADENTON FL 34207 BRADENTON FL 34207							
US US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	1	
					10/01/1983		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21 26					59-2329227	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						.75 Additional	
22 27						ee Required	
City & State City & State					- 11	5.00 May Be	
23 28						dded to Fees	
	Zip Country Zip			8. This corporation owes the current year Intangible Personal Property Tax.			
24	25		30		A		
	9. Name and Address of Curre	nt Registered Agent	8	1 Name	10. Name and Address of New Registered Agent	<u></u>	
KV IC	PIENCYL CTEVEN		l°	1 IAGILIE			
KAJCIENSKI, STEVEN				2 Street Add	dress (P.O. Box Number is Not Acceptable)		
4525 30TH ST W			_	_			
BRADENTON FL 34207			8	3			
			8	4 City	85	Zip Code	
		_		l <u> </u>	FL ⁸³		
office or re	to the provisions of Sections 607.056 egistered agent, or both, in the State n familiar with, and accept the obliga	of Florida. Such change was aut	thorized b	y the corpora	rporation submits this statement for the purpose of chang tion's board of directors. I hereby accept the appointmen	t as registered	
SIGNATURE	Signature, typed or printed name of registered age	ont and title if applicable (NOTE: 5	Registered Ag	ent signature requi	ired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE			1.1 TITLE			hange Addition	
NAME	, SILENZI, JOSEPH		1 2 NAME	:			
STREET ADDRESS	4525 30TH ST W		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 00000		1.4 CITY-				
TITLE	VP	☐ DELETE	2.1 TITLE			hange Addition	
NAME			2.2 NAME	ŀ		`\	
STREET ADDRESS	Nacicitotti, otevet s.			ET ADDRESS			
			2. 4 CITY	1	, was supply		
CITY-ST-ZIP TITLE			3.1 TITLE			hange Addition	
NAME		3.21		1			
			1	ET ADDRESS			
STREET ADDRESS			34. CITY		•		
CITY-ST-ZIP			4.1 TITLE			change Addition	
NAME			4. 2 NAM		_		
STREET ADDRESS				ET ADDRESS			
			4.4 CITY-				
CITY-ST-ZIP TITLE			5.1 TITLE		П	Change	
		5.2					
NAME				ET ADDRESS			
STREET ADDRESS:			5.4 CITY	i		ļ	
CITY-ST-ZIP			61 TITLE		ПС	hange Addition	
TITLE		(DECENT	62 NAME				
NAME			ŧ	ET ADDRESS		ļ	
STREET ADDRESS			6.4 CITY				
CITY-ST-ZIP			0.4 CHY	-01-AP			

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 antachaptent with an address, with all other like empowered.

SIGNATURE: