2/19/97 B- 2/20 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G72625

(8)

KEY WEST MARINE SERVICES, INC.

FILED Feb 19 1997 8:00am Secretary of State



Dringing! Plac	o et Buerrose	Mailing Address				
· · · · · · · · · · · · · · · · · · ·						
2222 MIDDLE TORCH RD SUMMERLAND KEY FL 33040		2222 MIDDLE TORCH RO SUMMERLAND KEY FL 33	042-5805			
US US				3. Date Incorporated or Qualified 12/07/1983	3a. Date of Last Report 01/31/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
1]		26		59-2355486	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional	
2		27 Cit. 8 State			Fee Hequired	
City & State	;	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Z _i p	Country	Zip	Country	This corporation has liability for in		
4	25	29	30		Yes No	
	g. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Reg	Istered Agent	
	IUINALDO, STEVEN B		81 Name	umas w. Konn	n Esq.	
	YAN, HORAN, & ESQUINALDO			tress (P.O. Box Number is Acceptable		
	WHITEHEAD STREET		6	Y WHITCH AO	<u> </u>	
KEY	WEST FL 33040	4:	83			
			84 City		85 Zip Code	
44 0	to the provisions of Sections 607.05	00 and 607 1500 Classide Otabul		oration submits this state or the pr	rpose of changing its registered	
office or r	egistered agent, or both, in the Sta	te of Florida. Such change was :	authorized by the	n's board of directors.	t the appointment as registered	
agent. La	m familiar with, and accept the obli	-	orida Statutes.		1. 1.	
SIGNATURE	Ebwano w Syrate types to protect name of registered a	Herand was taken a make abla (NO)	E: Registered Agent signature	Ted when reinstating)	<u>/4/47</u>	
12.		ND DIRECTORS	13.	ADDITIONS/C ANGES TO OFFICE	ERS AND DIRECTORS IN 12	
TIILF	PDVT 77	DELETE	1.1 TITLE		i Addition	
NAME	CRUSOE, EDWIN E JA- 73	۲,	1.2 NAME	causof Ebwin E.	. IV	
STREET ADDRESS	2222 MIDDLE TORCH RD		1 3 STREET ADDRESS	•	The state of the s	
CITY-ST-ZiP	SUMMERLAND KEY FL		1.4 CITY-ST-ZIP			
TITLE		DELETE	21 TIFLE	<u> </u>	☐ Change ☐ Additio	
NAME			2.2 NAME			
STREET ADORESS	H.		2.3 STREET ADDRESS		ı	
CITY-S1-ZIP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Additio	
TITLE Name		LA DETETE	3.1 ITILE 3.2 NAME		C oracido Civergino	
STRUCT ADDRESS	le		3.3 STREET ADDRESS			
City -SF-2iP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE	The second secon	☐ Change ☐ Additio	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZiFi			4.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		DELETE	5 1 TITLE	ш	Change Additio	
NAME			52 NAME			
STREET AUDRESS			5 3 STREET ADDRESS			
CITY ST-ZIF			5 4 CITY - ST - ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
TITLE		DELETE	6.1 TITLE		Change Additio	
NAME			6.2 NAME			
STREET ADORESS			6.3 STREET ADDRESS			
CITY - ST- ZIP			6.4 CITY-ST-ZIP			

14. I do 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 significant 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: