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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

TESS ELECTRICAL MARINE, INC.

FILED Feb 26 1998 8:00am Secretary of State

Principal Place of Business Mailing Address									(149) (It: 45) 9 19114 19114 19414 1854 18	** ****			
C/O PAUL SALENIEKS 3051 STATE RD 84 FORT LAUDERDALE FL 33312			PÒ FOI	C/O PAUL SALENIEKS PO BOX 8564 FORT LAUDERDALE FL 33309					DO NOT WRITE IN THIS SPACE				
US			US	US					3. Date Incorporated or Qualified 03/16/1984				
2. Principal Place of Business				2a. Mailing Address					4. FEI Number	****	A	pplied For	
21				26					59-2381407		N	ot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	
City & Chale				City & State								equired	
City & State			11	[28]					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
	Zip Couritry			Zip Country					This corporation owes or has paid the current year Intangible				
24	25		29	30					Personal Property Tax due June 30. X Yes No				
	9. Name and Ad	dress of Curren	t Registe	red Agent					10. Name and Address of New Re	gistered #	gent		
SA	LENIEKS, PAUL					81	Name						
7390 N.W. 54TH COURT LAUDERHILL FL 33319							Street	Street Address (P.O. Box Number is Not Acceptable					
						83							
						84	City				85 Zip	Code	
·		· 				Ш				<u> </u>	<u> </u>		
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 profess runne of registraria agent 12. OF LICERS AND							nt signature	required t	when reinslating) ADDITIONS/CHANGES TO OFFICE	DATE DEBS AND	DIRECTO	RS IN 12	
TITLE	PD	OLUCIA	O Olivi Ci	DELETE	111	ITI F		Τ	ADDITIONS/OFFARGES TO OFFIC	JENO AND	☐ Change	Addition	
NAME	SALENIEKS, PA	AUL			1.2 N								
STREET ADDRESS	7390 N.W. 54T				1.3 STREET ADDRESS								
CITY+ST-ZIP	LAUDERHILL F	L		1.4 CI			T-ZIP						
TITLE	D			DELETE	2.1 T	ITLE					Change	Addition	
NAME	Salenieks, M						2 2 NAME 2.3 STREET ADDRESS					ļ	
STREET ADORESS	7390 N.W. 54T												
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NAME					3.2 N								
STREET ADORESS							ADDRESS					ļ	
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NAME					5.2 N	IAME							
STREET ADDRESS					5.3 S	TREET	ADDRESS						
CITY-ST-ZIP					5.4 0	ITY-S	T-ZIP						
TITLE				☐ DELETE	6.1 T	ITLE					Change	Addition	
NAME					6.2 1	BMA							
STREET ADDRESS					6.3 9	TREET.	ADDRESS						
CITY-ST-ZIP			a ware			ITY-S) In C-	action 110 07/3VI) Florida Statutos I	further	etific that the	n information	

fy for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an I to expecte this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental a inual report is true and officer or director of the corporation or the receiver or trustee employed Block 12 or Block 13 if changed, or on an allowant ment with an address.

SIGNATURE: