## 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** 

## DOCUMENT # H26512 1. Corporation Name

BUTLER MARINE TECHNOLOGY, INC.

Principal Place	of Business	Mailing Address					
600 S.E. 5TH COURT POMPANO BEACH FL 33060		600 S.E. 5TH COURT					
		POMPANO BEACH FL 33060			DO NOT WRITE IN THIS SPACE		
	•				3. Date incorporated or Qualifed		
					10/22/1984		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		olied For
21		26			59-2469232		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Red		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Re	
·	e ·	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Count	ry	8. This corporation owes the current year	r Intangible	
<b>─</b>	25	<u> </u>	30	•	Personal Property Tax.		□No
24	9. Name and Address of Current		<u></u>		10. Name and Address of New Registe	red Agent	
	13.14. 3.14.		8	1 Name			
BUTLER, DAVID F.		,	_	82 Street Address (P.O. Box Number is Not Acceptable)			
600 S.E. 5TH COURT		82 Street		Z Street Add	Address (m.o. Box Number is not Acceptable)		
POM	IPANO BEACH FL 33060	•	8	3	· · · · · · · · · · · · · · · · · · ·		
				4 City		85 Zip C	
	A Carlo Barrer Carlo			1	· · · · · · · · · · · · · · · · · · ·	FLII	•
11. Pürsuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the abo	ve-named co	rporation submits this statement for the purpor	se of changing its	registered
	egistered agent, or both, in the State or im familiar with, and accept the obligati				tion's board of directors. I hereby accept the a	ppomiment as reg	310100
agont. ra	" In tellimer with and accept me cange."	,					
					•		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered A	gent signature requi	ired when reinstating) DAT		
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	DIRECTORS	Registered A	gent signature requi	ired when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	
					nog milan ramsaming)		RS IN 12
12.	OFFICERS AND	DIRECTORS	13.	-	nog milan ramsaming)	S AND DIRECTO	
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112. TITLE NAME	OFFICERS AND PD BUTLER, DAVID F. 600 S.E. 5TH COURT	DIRECTORS	13. 1.1 TITLE 1.2 NAM 1.3 STRE	E EET ADDRESS -ST-ZIP	nog milan ramsaming)	S AND DIRECTO	
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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 changely, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

CITY-ST-ZIP

**FILED** 

Jan 25, 1999 8:00am

**Secretary of State** 

01-25-1999 90014 008 \*\*\*150.00