

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

FILED  
Mar 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **H56871** (7)  
1. Corporation Name  
**J & J MARINE SERVICE, INC.**

Principal Place of Business  
**30008 46TH AVENUE N.  
ST. PETERSBURG FL 33714**

Mailing Address  
**30008 46TH AVENUE N.  
ST. PETERSBURG FL 33714**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>2922 46th Avenue N.</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>2922 46th Avenue N.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>04/04/1985</b>	
22 City & State 23 <b>St. Petersburg FL</b>		27 City & State 28 <b>St. Petersburg, FL</b>		4. FEI Number <b>59-2508401</b> Applied For Not Applicable	
24 <b>33714</b> Country <b>USA</b>		29 <b>33714</b> Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
25 <b>USA</b>		30 <b>USA</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
9. Name and Address of Current Registered Agent <b>NOWLING, JOHN D. 3804 KINGS AVENUE SOUTH BRANDON FL 33511</b>				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				10. Name and Address of New Registered Agent	

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable) <b>8711 Bliss Road</b>	
83	
84 City <b>Gibson</b>	85 Zip Code <b>33534</b>

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>PDST</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>NOWLING, JOHN DAVID</b>		1.2 NAME	
STREET ADDRESS <b>3804 KING AVE S.</b>		1.3 STREET ADDRESS <b>8711 Bliss Road</b>	
CITY-ST-ZIP <b>BRANDON FL</b>		1.4 CITY-ST-ZIP <b>Gibson, FL 33534</b>	
TITLE <b>STD</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>NOWLING, JAMI</b>		2.2 NAME	
STREET ADDRESS <b>3804 KING AVE S.</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>BRANDON FL</b>		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 incorporator 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 in an attachment with an address.

SIGNATURE:  **John D. Nowling 3/19/98 (813) 527-5078**

CR2E034 (10/97)