2002 UNIFORM BUSINESS REPORT (UBR)

J58296 DOCUMENT # 1. Entity Name RENMAR, INCORPORATED

Principal Place of Business PO BOX 6044

Mailing Address PO BOX 6044

| US | | US | | | |
|--------------------------------|---------|---------------------|---------|--|--|
| 2. Principal Place of Business | | 3. Mailing Addres | 38 | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | | |



FL

DO NOT WRITE IN THIS SPACE

59-2768181

| | - Fee Hedured | | |
|---|--|--|--|
| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent | | |
| | Name | | |
| RETTIG, RICHARD 1206 DUVAL STREET | Street Address (P.O. Box Number is Not Acceptable) | | |
| KEY WEST FL 33040 | | | |

City

(NOTE: Registered Agent signature required when reinstating)

4. FEI Number

5. Certificate of Status Desired

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Applied For

\$8.75 Additional

Zip Code

Not Applicable

11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. **PSDT** TITLE □ Detete TITLE Addition ☐ Change NAME RETTIG. RICHARD NAME STREET ADDRESS 1206 DUVAL STREET STREET ADDRESS CITY-ST-ZIP **KEY WEST FL** CITY-ST-ZIP TITLE **DVP** ☐ Delete TITLE ☐ Addition Change NAME WHITWORTH, KERRY D. NAME STREET ADDRESS 1206 DUVAL STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KEY WEST FL TITLE ☐ Change ☐ Delete TITI F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if

Richard Rettig President 4-26-02 305-296-8269