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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J59311

(7)

RHODES MARINE SURVEYORS AND CONSULTANTS, INC.

FILED
Jan 14 1997 8:00am
Secretary of State



Principal Place of Business 4701 N FEDERAL HWY S-340, BOX C-8 LIGHTHOUSE POINT FL 33064		Mailing Address 4701 N FEDERAL HWY S-340. BOX C-8 LIGHTHOUSE POINT FL 33064-6562						
US		US			<ol> <li>Date Incorporated or Qualified 02/27/1987</li> </ol>	3a. Date 02/14		Report
	Tace of Business	2a. Mailing Address			4. FEI Number		<del></del>	oplied For
21		26			59-2777202			ot Applicable
Suite, Apt.	.# etc.	Suite, Apt #, etc.			5. Certificate of Status Desired			Additional equired
City & Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zφ	Country	Zip	Country	y	8. This corporation has liability for in			199.032,
24	25	29	30			Yes 🔲 (		
	9. Name and Address of Currer	nt Registered Agent		·	10. Name and Address of New Reg	platered Age	ent	
BEF	rman, Philip M.		B1	Name	'			
2424 NE 22ND STREET POMPANO BEACH FL 33062			82	Street Ado	dress (P.O. Box Number is Not Acceptab	le)		
			83					
			84	City			<b>85</b> Zip	Code
				1 1	rporation submits this statement for the pation's board of directors. I hereby accep	┡┖┈╵		
12.	·	ID DIRECTORS	TE: Registered Ag	jent signature requ	alred when reinstating)  ADDITIONS/CHANGES TO OFFIC	ERS AND D		
	1 <b>R</b>							
TITLE	P	DELETE	1 1 TITLE				Change	Addition
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. 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 signature shall have the same legal effect as if made under oath; that I am an officer or orrection of corporation or the receiver or trustee appropriate to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/97 (954) 9

(954) 946-6779 Daysime Phone #