SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT#** 

126122

161

OCEAN BOAT WORKS, INC.  Principal Place of Business  Mailing Address  RICK J. DAVENPORT 3527 AVE % 3527 AVE %						
3527 AVE "K" RIVIERA BEACH	i FL 33404	RIVIERA BEACH FL 33404		3. Date Incorporated or Qualified 07/31/1987	3a. Date of Last Report	
2. Principal Plac	e of Business	2a. Mailing Address		4, FEI Number	08/22/1995 Applied For	
11		26		65-0004665	Not Applicable	
Suite, Apt #, etc		Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional	
Chail State		27			Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in		
24	25	29 3	10	Florida Statutes	Yes No	
	9. Name and Address of Curre	nt Registered Agent	B1 Name	10. Name and Address of New Reg	istered Agent	
	enport, rick J.		B1 Name			
3527 AVE "K"			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
RIVIERA BEACH FL			83	83		
			-		Jac I Zu Coda	
			84 City		FL 85 Zip Code	
12. TITLE NAME STREET ADDRESS	D DAVENPORT, RICK J. 3527 AVE "K"	ND DIRECTORS  DELETE	Registe ed Agent signature rege  13.  11 TillE  12 NAME  1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12  Change Addition	
CITY-ST-ZIP	RIVIERA BEACH FL		1.4 City - ST - ZIP		Change Addition	
TITLE		DELETE	2 1 TITLE 2 2 NAME		Change Addition	
NAME STREET ADDRESS			2 3 STREET ADDRESS			
DITY-ST-ZIP			2 4 CITY - ST - ZIP			
THE		DELETE	3 1 TITLE		Change Addition	
NAME			3.2 NAMÉ			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	3.4 C)TY+ST-ZIP 4.1 TITLE		Change Additio	
TITLE		L_ Decert	4.2 NAME		F-1 - 10.30 F-1 10.000.00	
STREET ADDRESS			4 3 STREET ADDRESS			
CITY-ST-ZIP			: 4 4 CITY - ST - ZIP			
TITLE		DELETE	5 1 TIFLE		Change Additio	
NAME			5 2 NAMË			
STREET ADDRESS			5.9 STREET ADORESS			
CITY-ST-ZIP		DELETE	5 4 CHY - ST - ZIP 6 1 TITLE		Change Additio	
TITLE NAME		C pttrir	62 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP			
14. I do hereby further cert	to that the information indicated a	in this annual report or supplement of the corporation or the reces	ital annual report is true ver or trustee empowere	alify for the exemption stated in Section 1 and accurate and that my signature sha ed to execute this report as required by 0	nave ine same iedai eneccas ir	
SIGNATU	// 4 //	QUELLE ST. OR PHINTED NAME OF SIGNING OFFICER OF		7-25-96	4018424880 Daythe Philips	

CR2E034 (3/96)