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Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90089 045 ***150.00

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

DOCI	IA A E N	IT #	100	. ^^
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1. Corporation Name

OCEAN BOAT WORKS, INC.

Principal Place	e of Business	Ma	iiling Address		_						
% RICK J. DAV	'ENPORT	% F	RICK J. DAVENPORT								
3527 AVE "K" 3527 AVE "K"								DO NOT WRI	TE IN THIS	SPACE	
RIVIERA BEACH	1 FL 33404	HIV	IERA BEACH FL 33404					3. Date Incorporated or Qualifed	12 114 11110	OI AOL	
								07/31/1987	, ₄ (4)		
Principal P	lace of Business	2a.	Mailing Address					4. FEI Number		<u> </u>	plied For
21		26						65-0004665			t Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.75 A Fee Re	
City & Stat	te		City & State					6. Election Campaign Financing		\$5.00	May Be
23		28						Trust Fund Contribution		Added to	o Fees
Zip	Country		Zip	Cor	ntry			8. This corporation owes the curr	ent year int	angible	
24	25	29		30				Personal Property Tax.			ØNo _
	9. Name and Address of Curre	nt Regis	tered Agent		\Box			10. Name and Address of New I	Registered	Agent	{
	T1007 007				81	Nam	е				
	ENPORT, RICK J.				82	Strei	t Addre	ess (P.O. Box Number is Not Accepta	able)		
	7 AVE "K"										
RIVIE	era Beach Fl				83						
	•				84	City			FL	85 Zip (Code
office or t	to the provisions of Sections 607.056 registered agent, or both, in the State am familiar with, and accept the obligations are secured to the control of the	of Floridations of,	la. Such change was a Section 607.0505, Flo	utnonze rida Stat	1 by utes	tne co	poratio	n s board of directors. Thereby accer	or me appor	changing its ntment as re	registered gistered
	Signature, typed or printed name of registered age				Agen	it signatu	e required	when reinstating)	DATE	D DIDCOTO	DO 111 40
12.	OFFICERS AI	ND DIRE		13.				ADDITIONS/CHANGES TO OF	FICERS AN	☐ Change	Addition
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NAME	DAVENPORT, RICK J.			1.2 N							
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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 changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP