FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 FEB 27 AM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K06494 (4)

1. Corporation Name

SEABULK OCEAN SYSTEMS HOLDINGS CORPORATION

Principal Place of Business	Mailing Address
2200 ELLER DR. P O BOX 13009 FT LAUDERDALE FL 33316	2200 ELLER DR. P O BOX 13009 FT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/11/1987
3a. Date of Last Report: 04/08/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24:
Country — 25:
Zip — 29:
Country — 30:

4. FEI Number: 65-0021810 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DOUGLAS, GENE
2200 ELLER DR.
FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	11 TITLE	☒ Change ☐ Addition	
NAME	~~HVIDE, HANS J.~~	12 NAME	Delete	
STREET ADDRESS	~~2200 ELLER DR.~~	13 STREET ADDRESS		
CITY-ST-ZIP	~~FT LAUDERDALE FL~~	14 CITY-ST-ZIP		
TITLE	DP	21 TITLE	C/P/D	☒ Change ☐ Addition
NAME	HVIDE, J. ERIK	22 NAME		
STREET ADDRESS	2200 ELLER DR.	23 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	24 CITY-ST-ZIP		
TITLE	DVT	31 TITLE		☐ Change ☐ Addition
NAME	FARMER, GERALD	32 NAME		
STREET ADDRESS	2200 ELLER DR.	33 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	34 CITY-ST-ZIP		
TITLE	VS	41 TITLE		☐ Change ☐ Addition
NAME	DOUGLAS, GENE	42 NAME		
STREET ADDRESS	2200 ELLER DR.	43 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	44 CITY-ST-ZIP		
TITLE	VD	51 TITLE		☐ Change ☐ Addition
NAME	SWEENEY, EUGENE F.	52 NAME		
STREET ADDRESS	2200 ELLER DRIVE	53 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] 2/15/95 (305) 524-4200, Ext. 800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Gene Douglas VP & Sec.

0024320 CP