

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K38018 (3)

1. Corporation Name
* RON'S MARINE REPAIR, INC.

Principal Place of Business
14338 S.W. 142ND AVENUE
MIAMI FL 33186

Mailing Address
14338 S.W. 142ND AVENUE
MIAMI FL 33186



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 23 13804 SW 139CT City & State 23 Miami FL Zip 24 33186		2a. Mailing Address 26 Same City & State 27 Same Zip 28 Same Country 29 Same		3. Date Incorporated or Qualified 10/11/1988	
4. FEI Number 65-0088543		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		9. Name and Address of Current Registered Agent MARCUS, ALAN K. 4801 PONCE DE LEON BLVD SUITE 21 CORAL GABLES FL 33146	
10. Name and Address of New Registered Agent		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.		12. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	13804, SW 139CT
NAME	WATKINS, RONNIE E.	1.2 NAME	MIAMI FL 33186
STREET ADDRESS	14338 S.W. 142ND AVENUE	1.3 STREET ADDRESS	Same
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	VST	2.1 TITLE	
NAME	WATKINS, CRISTINA	2.2 NAME	
STREET ADDRESS	14338 SW 142 AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: <i>Ronnie E. Watkins</i>		Ronnie E. WATKINS	
DATE: 4-25-98		305-251-2250	

CR2E034 (10/97)