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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

UNITED MARINE ASSOCIATES, INC.

## **FILED** Jan 29 1998 8:00am Secretary of State



Bringing Blace of Business					E INDUDER BIL BEDEN INTER ARTER ARTER DENIE DENIE DENIE DENIE BEREI BEDER BERRE	
Principal Place of Business Mailing Address						
901 SE 17TH STREET 901 SE 17TH STREET 4205 205						
" - ** ·			DERDALE FL 33316			DO NOT WRITE IN THIS SPACE
US US			,,,,,,			3. Date Incorporated or Qualified
						11/29/1988
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21		26				65-0125510 Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				S8.75 Additional
22	.,	27				5. Certificate of Status Desired Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip				untry		This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
24	9. Name and Address of Current Registered Agent		100	10. Name and Address of New Registered Agent		
						e
GRIMM, PETER W 901 SE 17TH STREET #205						
			82 Street Ac			et Address (P.O. Box Number is Not Acceptable)
FI.	. LAUDERDALE FL 33316			83		
				65		
				84	City	85 Zip Code
				لبل		FL   69   210 code
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Stat	tutes, the a	above	the cor	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
agent. I a	im familiar with, and accept the obliga	tions of, Section 607.0505,	Florida Sta	tutes		sporting the state of the state of the spectrum and the state of the s
SIGNATURE						
SIGNATORE	Signature, typed or printed name of registered agen	t and title if applicable. (N	OTE: Register	ed Age	nt signatur	are required when reinstating) DATE
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1,11	ITLE		S/D Change X Addition
NAME	BRAYER, R. CURTIS			1,2 NAME		Gerhart, Bill R.
STREET ADDRESS	901 SE 17TH STREET, #205		1.3 9	1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 0	1.4 C(TY-ST-ZIP		Ft Lauderdale, FL 33316
TITLE	The state of the s		2.1 1	2.1 TITLE		☐ Change ☐ Addition
NAME	DULANY, JOHN H.		2.21	2.2 NAME		
STREET ADDRESS	and on their owners to on		2.3 STREET ADDRESS		AODRESS	
CITY-ST-ZIP	ET LAUDEDDALE EL			2, 4 CITY - ST - ZIP		
TITLE	D			3.1 TITLE		Change Addition
NAME	FINLEY, P.C.	-				
			1	3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS	FT. LAUDERDALE FL					
CITY-ST-ZIP				3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
TITLE	2011/11 PETER 14					Onlings Addition
NAME		205		NAME		
STREET ADDRESS	901 S.E. 17TH STREET SUITE	200			address	5
CITY-ST-ZIP	FT. LAUDERDALE FL	TT		ITY-ST	- ZIP	A
TITLE	PD	DELETE	5.1 7			Change Addition
NAME			IAME			
STREET ADDRESS	•		TREET .	address	s	
CITY - ST - ZIP	FT. LAUDERDALE FL		5.4 (	NY-SI	T-ZIP	
TITLE	VPD	DELETE	6.1 1	ITLE		Change Addition
NAME	DERECKTOR, ROBERT E.		6.2 1	IAME		
STREET ADDRESS	AND A STATE OF A STATE OF THE SAME		6,3 5	6.3 STREET ADDRESS		
CiTY-ST-ZIP	FT. LAUDERDALE FL			ITY-SI		
14. I hereby certify that the information supplied with this filling 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 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 indicated on this annual report or supplemental annual report or						

1/23/98

954-524-4616