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PROFIT CORPORATION ANNUAL REPORT

1006



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # K52184 (4) 1. Corporation Name DIVERSIFIED MARITIME SERVICES, INC.									
vincipal Place of Business 3250 N.W. NORTH RIVER DR.			Mailing Address 3250 N.W. NORTH RIVER DR. MIAMI FL 33142		1 10 10 11 10 10 10 10		UISA UUUU U		
MIAMI FL 3314	32		MIAMI FE 33142			3. Date incorporated or Qualified 12/19/1988	3a. Date 06	of Last Re /29/199	
1	ce of Business	26	. Mailing Address	 · · · · ·	······································	4. FEI Number 65-0088250	<u> </u>		pplied For lot Applicable
Suite, Apt. #, etc. City & State			Suite, Apt. #, etc. 27 City & State 28			5. Certificate of Status Desired	ם	\$8.75 Additional Fee Required	
									\$5.00 May Be Added to Fees
Zipi	Country	[29]	Ζιρ	Count	ry	8. This corporation has liability for	intangible tax		
	25 9. Name and Address		stered Agent	130		10. Name and Address of New		Agent	
	5. 110			8	1 Name				
THOMPSON, RAYMOND J. 3250 N.W. NORTH RIVER DRIVE MIAMI FL 33142					2 Street Addr	ress (P.O. Box Number is Not Accepta	ible)		
					13				
				1	14 City			85 Zıçı	Code
					l.		<u>FL</u>	noloo ito r	opintored office
1. Pursuant to	the provisions of Sections	s 607.0502 and 6	07.1508, Florida Statu	tes, the above	e named corporation's boa	ration submits this statement for the pure of directors. I hereby accept the app	urpose of cha pointment as	registered	agent. I am
	o the provisions of Sections of agent, or both, in the St n, and accept the obligatio	s 607,0502 and 64 late of Floridal Suc insiof, Section 607	07.1508, Ftorida Statu ch change was authori 7.0505, Florida Statute	tes, the above zed by the co s.	e-named corpo- irporation's boa	ration submits this statement for the pu ard of directors. I hereby accept the app	urpose of cha pointment as	registered	agent. I am
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SIGNATURE: _ SIGNATURE

SNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

130/96

(307) 633-322X