**PROFIT CORPORATION** ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # K82946



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90267 037 \*\*\*158.75

CELSO	Marine Surve	rs inc									
Principal Place	e of Business		Mailing Address					BA(A111 BA) 1861# 1181# 187f	4 M1846 (111) (1)	A:: AIAIF 21811 AIAI(	#1 841 WIWIL 1981
1406 NORMANI	DY DR.		1406 NORMANDY DR								
MIAMI BCH FL 33141			MIAMI BEACH FL 33141				DO NOT W	/RITE IN T	HIS SPACE		
US							3. Date Ir	corporated or Qualif			
							ľ	/1989			}
2. Principal D	lace of Business		2a. Mailing Address				4. FEI Nu			Ar	oplied For
- Fillicipal F	iaco di Busilloss		26 Maining Address					21903		<del></del>	ot Applicable
Suite, Apt.	#, etc.	·	Suite, Apt. #, etc.						×		Additional
22	.,		27				5. Certifo	ite of Status Desired	<b>5</b>	Fee Re	ec uired
City & S:at	e		City & State				6. Electio	1 Campaign Financii	ng $\Box$	\$5.00	May Be
23			28				1	und Contribution	<u> </u>		tc Fees
Zip	Coun	try	Zip	Cou	ıntry		8. This co	rporation owes the c	current yea		
24	25		29	30				al Property Tax.		Yes	No
	9. Name and Add	ress of Current I	Registered Agent		1 -1-		10. Name	and Address of Ne	w Register	red Agent	
0/5	7 00 00				81	Name				-	
BAEZ, CELSO					82	Street Ac	dress (P.O. Box	Number is Not Acce	eptable)		
	S NORMANDY DR	•			-					_ <del></del>	
MIA	MI BEACH FL 3314	ı			83						i
					84	City				85 Zip	Code
<u> </u>					ΙĹ			11: -4-4		a of changing its	ragistared
11. Pursuant office or r	to the provisions of Se egistered agent, or bo	ctions 607.0502 ath, in the State of	and 607.1508, Florida Stat Florida, Such change was	utes, the a authorized	bove- d by th	named cone corpora	orporation submit ation's board of o	is this statement for the irectors. I hereby ac	cept the at	opointment as re	eg stereu
11. Pursuant office or ragent. a	to the provisions of Se egistered agent, or bo m familiar with, and ac Signature, typed or printed na	th, in the State of cept the Oligation	Florida, Such change was ons of Section 607.0505, Florida title if applicable. (NO	Authorize lorida Stat	d by If tutes.	ne corpora	etion's board of o	rectors. I nereby ac	Copt the ap	123/99	eg stered
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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.

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)