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 #

K86117

(4)

B.M. MARINE, INC.

FILED Apr 22 1998 8:00am Secretary of State

Principal Placi	Principal Place of Business		Mailing Address				
MMERRIE A. SLATER 22864 OVERSEAS HWY MM23 CUDJOE KEY FL 33042			%Merrie A. Slater 22864 Overseas hwy MM23 Cudjoe Key Fl 33042		DO NOT WRITE IN T	HIS SPACE	
COUNCE RET PL 33042		CODICE VELLET 9304			3. Date Incorporated or Qualified		
					05/05/1989		
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	I IA	pplied For
21		26	 7		65-0126790		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.					Additional
22		27	7		5. Certificate of Status Desired	Fee R	equired
City & State		City & State	_L		8. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Zip Country		8. This corporation owes or has paid the	current year In	tangible
24	25	29	30		Personal Property Tax due June 30.		_] No
	9. Name and Address of Curre	nt Registered Agent		_ 	10. Name and Address of New Registe	red Agent	
	LATER, MERRIE A		81	Name			i
22864 OVERSEAS HWY MM23			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
C	UDJOE KEY FL 33042						
			83	1			1
			84	City		85 Zip	Code
11. Pursuant i	to the provisions of Sections 607.05 egistered agent, or both, in the Stati	02 and 607.1508, Florida Statu	tes, the above	e-named cor	rporation submits this statement for the purpo ation's board of directors. I hereby accept the	se of changing i	ts registered
agent. I a	m familiar with, and accept the oblig	jations of, Section 607.0505, F	lorida Statule	S.	anon a abard of directors. Thereby decept the	арропинен аз	rogistered
SIGNATURE							
	Signature, typed or printed name of registered as			ent signature requ	uired when reinstating) DA		
12.		VD DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	DELETE	1.1 TITLE			L Change	☐ Addition
NAME	SLATER, MERRIE A		1.2 NAME				
STREET ADDRESS	121 SANTIAGO ST		1.3 STREE	I ADDRESS			
CITY-ST-ZIP	ROYAL PALM BCH FL	DELETE	1.4 CITY-	ST-ZIP			1 1 1 1 1 1 1 1
TITLE	D OLATED DODGOV O	☐ DÉLETE	2.1 TITLE			☐ Change	☐ Addition
NAME	SLATER, ROBERT C		2.2 NAME	- 1			1
STREET ADDRESS	121 SANTIAGO ST		2.3 STREE	F ADDRESS			
CITY-ST-ZIP	ROYAL PALM BCH FL.	Delete	2. 4 CITY-	ST-ZIP			
TITLE	D OLATED DIGITADD A	DELETE	3.1 TITLE			L Change	☐ Addition
NAME	SLATER, RICHARD A	1400	3.2 NAME				ļ
STREET ADDRESS 22984 OVERSEAS HWY MM23				ADDRESS			ļ
CITY-ST-ZIP	CUDJOE KEY FL 33042	T prierr	3 4. CiTY-	ST-ZIP			4 - 100
TITLE		☐ DELETE	4.1 TITLE			L Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP		Don er-	4.4 CITY- :	ST - ZIP		——————————————————————————————————————	
FITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ADDRESS			!
CITY-ST-ZIP			5.4 CITY - 5	61 - ZIP			
TITLE		☐ DFLETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	j			J
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S	ST - 21P			

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 trustate 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 / Spice (State

4/13/98 305-745-1085