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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 18 1997 8:00am

Secretary of State

(305) 451-3119

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K99663

(2)

RCG MARINE LABOR, INC.

SIGNATURE:

Principal Place		Mailing Address ** RONALD C. GILLMAN	Mailing Address			A LOUGHERT BIN CAME INCIDENTIA BELLON 1864	31811 B1811 #1	1911 1791 1 BIBLE	81811 (\$ 8 1	
% RONALD C. GILLMAN P O BOX 2780 KEY LARGO FL 33037		P O BOX 2790	P O BOX 2790							
KET LANGO FL	. 33037	KET LAHOU PL 33037-77	KEY LARGO FL 33037-7790			3. Date incorporated or Qualified 3a. Date of Last Report				
		· · · · · · · · · · · · · · · · · · ·				06/29/1989	16/1996			
	lace of Business	ļ	2a. Mailing Address			4. FEI Number			oplied For	
Suite, Apt	H esta	Suito Apt # oto	·			65-0134319			ot Applicable	
22		Suite, Apt. #, etc.	27			5. Certificate of Status Desired				
City & State	2	City & State	├ ─┐			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution				
Zip	Country	Zip	Cou	intry		8. This corporation has liability for i	ntangible	tax under s	. 199.032,	
24	25	29	30	,				No		
	9. Name and Address of Cur	rent Hegistered Agent		81	Name	10. Name and Address of New Re	pistered /	Agent		
	MAN, RONALD C.			61	Name					
	MARKER 100.3 OVERSEAS I	HIGHWAY		82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
KET	LARGO FL 33037			83						
				84	City		FL	85 Zip (Code	
11. Pursuant t	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	ites, the a	bove	-named corp	poration submits this statement for the p	urnosa of	changing it	s registered	
office or ri	egistered agent, or both, in the Sti m lamiliar with, and accept the ob-	ate of Florida. Such change was ligations of Section 607,0505. F	authorize	d by lutes	the corporat	tion's board of directors. I hereby accep	it the app	ointment as	registered	
SIGNATURE	trial trial, and troops the oc	againeria or, buotieri obri, occo, r	10.102 014	.0.00						
SIGNATORE	Signature, typed or printed name of registered	agent and title if applicable (NO	TE: Registere	d Ager	nt signature requi	red when reinstating)	DATE			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		IS IN 12	
T-[LE	D	☐ DELETE	1.1 TI	TL€				Change	Addition	
NAME	GILLMAN, RONALD C.		1.2 N	AME						
STREET ADDRESS	P O BOX 2790 N/A				ADDRESS					
CITY-ST-ZIF	KEY LARGO FL	DELETE		TY-51	- ZIP		,	T 05	Adestas	
TITLE		T percit	2.1 T/					L. Change	Addition	
NAME STREET ADDRESS				2.2 NAME 2.3 STREET ADDRESS						
City-ST-ZiP										
TITLE	DELETE			TLE	1-21			Change	Addition	
NAME		—	3.2 N/			• •	$L_{\rm App}$			
STREET ADORESS					ADDRESS .					
CITY-SI-ZIP				ITY-S						
TITLE		DELETE	4.1 TI					☐ Change	Addition	
NAME			4. 2 N	IAME						
STREET ADDRESS			4.3 ST	REET	address					
CITY-ST-ZiF		· · · · · · · · · · · · · · · · · · ·	4.4 CI	TY-ST	- ZIP		····			
TOLE		DELETE	5.1 Ti	TL€				Change Change	Addition	
NAME			5.2 N/							
STREET ADORESS			5.3 ST	REET	ADDRESS					
CITY-ST-ZIP		LINELTE		TY-ST	- ZIP	***************************************		T 01	1 1 2 2 2 2	
TITLE		☐ DELETE	6.1 T(L Change	Addition	
NAME CIGGET ADSOLGS			6.2 N/		. Dancac					
STREET ADORESS					ADDRESS					
14. Ldo heret	ov certify that the information supre	lied with this filing does not qual	lify for the	TY-SI exer	nntion stated	d in Section 119.07(3)(i), Florida Statuter	s I further	certify that	the	
informatio Lant an of	n indicated on this annual report of	or supplemental annual report is or the receiver or trustee empor	true and a wered to e	3CCUI	rate and that	t my signature shall have the same lega rt as required by Chapter 607, Florida S	Laffect as	if made uni	der nath: that	

Ronald C. Gillman, President 02-07-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR