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**May 07 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L17685 (3)
1. Corporation Name
SEALANDER MARINE, INC.



Principal Place of Business: **40301 FISHER ISLAND DR FISHER ISLAND FL 33109**
Mailing Address: **40301 FISHER ISLAND DR FISHER ISLAND FL 33109-1223**

3. Date Incorporated or Qualified: **09/22/1989** 3a. Date of Last Report: **03/15/1996**
4. FEI Number: **65-0146524** Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **21 701 BRICKELL AVE SUITE 2420 MIAMI, FL 33131 USA**
2a. Mailing Address: **26 701 BRICKELL AVE SUITE 2420 MIAMI, FL 33131 USA**

9. Name and Address of Current Registered Agent: **SHORE, H. ALLAN 1221 BRICKELL AVENUE MIAMI FL 33131**

10. Name and Address of New Registered Agent: **81 Name: ROBERT M. SAUNDERS, PA. 82 Street Address (P.O. Box Number is Not Acceptable): COURTHOUSE TOWER 83 44 WEST FLAGLER ST # 402 84 City: MIAMI FL 85 Zip Code: 33130**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Robert M. Saunders* **ROBERT M. SAUNDERS, PA** **4/23/97**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	D	<input type="checkbox"/>
NAME	GREEN, STEVEN	
STREET ADDRESS	40301 FISHER ISLAND DR	
CITY - ST - ZIP	FISHER ISLAND FL	
TITLE	P	<input type="checkbox"/>
NAME	GREEN, STEVEN	
STREET ADDRESS	40301 FISHER ISLAND DR.	
CITY - ST - ZIP	FISHER ISLAND FL	
TITLE	D	<input type="checkbox"/>
NAME	SAFCHIK, JEFFREY	
STREET ADDRESS	40301 FISHER ISLAND DR.	
CITY - ST - ZIP	FISHER ISLAND FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. I do 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.

SIGNATURE: *[Signature]*

CR2E034 (9/96)