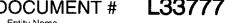
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) L33777 **DOCUMENT #**





Mar 19, 2003 8:00 am §
Secretary of State **FILED**

1. Entity Name BAY MARINE MECHANICAL SERVICES, INC.								03-19-2003 9	0162 00	3 ***150	.00	•
BAY MARINE 4030 MIRAMA	JRG FL 33705	inC	BAY MA 4030 MI ST PETI US	Mailing Address BAY MARINE MERCH SER INC 4030 MIRAMAR WAY S ST PETERSBURG FL 33705 US 3. Mailing Address								
Suite, Apt	. #, etc.		Suite,	Suite, Apt. #, etc.				☐ CHECK HERE IF	MAKING	CHANGES	<u></u> .	244.4
City & Sta	te		City &	City & State			4.	4. FEI Number 59-2979669			oplied For ot Applicable	_
Zip Country			Zip		itry	5. Certificate of Status Desired S8.75 Additional Fee Required			ditional d			
	and Address of Cur	rent Registered			7.	Name and Address of New Re-	gistered A	gent]		
RIVES, MARIE T.						Name						7
	ANIE I.						Street Address (P.O. Box Number is Not Acceptable)					
	TER FL 346	**								•		-
		: }							FL	Zip Cod	e	\dashv
8. The above	e named entit	isubmits this stateme	ent for the purpos	e of changing its	register	l ed office or regis	tered ac	gent, or both, in the State of Flori		amiliar with,	and accept	1
SIGNATURE												
0.07.11.10.11.2	Signature, typed	or printed name of registered	agent and title if applica	able. (NOTE	: Registere	d Agent signature requi	ired when r	reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Final Trust Fund Contribution.	ncing		0 May Be I to Fees	1
10.	_	OFFICERS A	AND DIRECTORS	ò	11.		ΑC		ERS AND	DIRECTORS	S IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RHODES, 4030 MIRA ST PETE F	MAR WAY S		☐ Delete		4			,	☐ Change	☐ Addition	E034 (40/00)
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 1