

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L34583** (9)

1. Corporation Name

ASSOCIATED MARINE TECHNOLOGIES, INC.



Principal Place of Business

Mailing Address

490 TAYLOR LANE
490 TAYLOR LANE
DANIA FL 33004
US

490 TAYLOR LANE
DANIA FL 33004
US

2. Principal Place of Business

21 490 Taylor Lane

State Apt. #, etc.

22 City & State

23 Dania, Florida

24 Zip 33004 Country U.S.A.

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

11/30/1989

3a. Date of Last Report

02/14/1995

4. FEI Number

59-2989911

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

9. Name and Address of Current Registered Agent

MISER, SCOTT A.
490 TAYLOR LANE
DANIA FL 33004

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of Registered Agent or Secretary of State

Signature of Agent or Secretary of State

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	DP	☐ DELETE
2. NAME	MISER, SCOTT A.	
3. STREET ADDRESS	721 MOCKINGBIRD LN	
4. CITY-STATE-ZIP	PLANTATION FL	
5. TITLE		☐ DELETE
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE		☐ DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	☐ Change ☒ Addition
6. NAME	D/S/T
7. STREET ADDRESS	Miser, Joyce E.
8. CITY-STATE-ZIP	721 Mockingbird Ln.
9. TITLE	☐ Change ☒ Addition
10. NAME	D
11. STREET ADDRESS	Metz, John S.
12. CITY-STATE-ZIP	5728 W. Laurie Lane
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	Glendale, AZ 85302
16. CITY-STATE-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/96

(954) 926-0308

CR2E034 (12/95)