

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L42990

FILED
Apr 27, 2002 8:00 AM
Secretary of State

Entity Name: HAINES MARINE, INC.

Current Principal Place of Business:

402 NW 7TH AVENUE
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

402 NW 7TH AVENUE
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 65-0177878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINES, TINA
402 NW 7TH AVENUE
BOCA RATON, FL 33486

Name and Address of New Registered Agent:

HAINES, OLIVER
402 NW 7TH AVENUE
BOCA RATON, FL 33486

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: OLIVER HAINES

04/27/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: HAINES, OLIVER K.,
Address: 402 NW 7TH AVENUE
City-St-Zip: BOCA RATON, FL

Title: PD () Delete
Name: HAINES, TINA
Address: 402 NW 7 AVE
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAINES, OLIVER K
Address: 402 NW 7TH AVENUE
City-St-Zip: BOCA RATON, FL 33686

Title: S (X) Change () Addition
Name: HAINES, TINA M
Address: 402 NW 7 AVE
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLIVER K HAINES

PD

04/27/2002

Electronic Signature of Signing Officer or Director

Date