

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L62106 (4)

1. Corporation Name

LOCKS AND WATERWAYS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

C/O JAMES R. MCNEW
765 DATE PALM RD.
VERO BCH. FL 32963
US

765 DATE PALM ROAD
VERO BEACH FL 32963
US

3. Date Incorporated or Qualified
03/28/1990

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 2834 LONGLEAF RD.

26 2834 LONGLEAF RD.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

4. FEI Number

65-0208287

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

23 City & State

PANAMA CITY, FL

28 City & State

PANAMA CITY, FL

24 Zip

32405

Country

USA

29 Zip

32405

Country

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCNEW, JAMES R.
765 DATE PALM ROAD
VERO BEACH FL 32963

81 Name

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

2834 LONGLEAF RD.

83

84 City

PANAMA CITY

FL

85 Zip Code

32405

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME LOPEZ, EUDORO
STREET ADDRESS 428 SW 9TH STREET #10
CITY-ST-ZIP MIAMI FL

TITLE VSD ☐ DELETE
NAME MCNEW, JAMES R.
STREET ADDRESS 765 DATE PALM ROAD
CITY-ST-ZIP VERO BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 171 NW 97 AVE, #316
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 2834 LONGLEAF RD
2.4 CITY-ST-ZIP PANAMA CITY, FL 32405

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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 as changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-96

Date

904 6748500

Daytime Phone #

CR2E034 (12/95)