

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L73878** (5)

1. Corporation Name

CUSTOM VESSELS OF FLORIDA, INC.



Principal Place of Business

~~1835 WEST FLAGLER STREET, #201~~
~~MIAMI FL 33135~~
~~XXXXXXXXXX~~

Mailing Address

~~1835 WEST FLAGLER STREET, #201~~
~~MIAMI FL 33135~~

1110 Brickell Avenue, 7th Floor
Miami, Florida 33131

2. Principal Place of Business

21 State, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address

26 **1110 Brickell Avenue**

27 State, Apt. #, etc.

27 **Seventh Floor**

28 **Miami, Florida 33131**

29 Zip
30 Country

3. Date Incorporated or Qualified
05/17/1990

3a. Date of Last Report
05/23/1995

4. FEI Number
65-0193502

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

FENTE, MANUEL F ESQ.
1835 WEST FLAGLER STREET, #201
MIAMI FL 33135

10. Name and Address of New Registered Agent

81 Name
Manuel F. Fente, Esq.
82 Street Address (P.O. Box Number is Not Acceptable)
1110 Brickell Avenue
83 **Seventh Floor**
84 City
Miami
85 Zip Code
FL 33131

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 being 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)

(Signature of Registered Agent)

DATE

2-13-96

12. OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE D	1. TITLE ☐ Change ☐ Addition
2. NAME FENTE, MANUEL F	2. NAME
3. STREET ADDRESS 1835 WEST FLAGLER STREET, #201	3. STREET ADDRESS
4. CITY, ST, ZIP MIAMI FL 33135	4. CITY, ST, ZIP
5. TITLE D	5. TITLE ☐ Change ☐ Addition
6. NAME PEREZ, RIGOBERTO	6. NAME
7. STREET ADDRESS 1835 WEST FLAGLER STREET, #201	7. STREET ADDRESS
8. CITY, ST, ZIP MIAMI FL 33135	8. CITY, ST, ZIP
9. TITLE ☐ DELETE	9. TITLE ☐ Change ☐ Addition
10. NAME	10. NAME
11. STREET ADDRESS	11. STREET ADDRESS
12. CITY, ST, ZIP	12. CITY, ST, ZIP
13. TITLE ☐ DELETE	13. TITLE ☐ Change ☐ Addition
14. NAME	14. NAME
15. STREET ADDRESS	15. STREET ADDRESS
16. CITY, ST, ZIP	16. CITY, ST, ZIP
17. TITLE ☐ DELETE	17. TITLE ☐ Change ☐ Addition
18. NAME	18. NAME
19. STREET ADDRESS	19. STREET ADDRESS
20. CITY, ST, ZIP	20. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP
5. TITLE ☐ Change ☐ Addition
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP
9. TITLE ☐ Change ☐ Addition
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP
13. TITLE ☐ Change ☐ Addition
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP
17. TITLE ☐ Change ☐ Addition
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntary 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 holder 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 in changed or on an addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-96 305-372-1370

CR2E034 (12/95)