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**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

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Zip

City & State



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M14795

(2)

**BOCA DELRAY MARINE ENGINEERING INC.** 

Principal Place of Business Mailing Address 5670 WILLOW CREEK CT. 5670 WILLOW CREEK CT. DELRAY BEACH FL 33484-6934 DELRAY BEACH FL 33484-6934 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt #, etc

4. FEI Number Applied For 65-0099657 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be

3. Date Incorporated or Qualified

05/01/1985

Trust Fund Contribution 28 Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

81 Name FRIEUNG, EDWARD 5670 WILLOW CREEK CT. 82 **DELRAY BEACH FL 33484** 83

Street Address (P.O. Box Number is Not Acceptable) City 85 Zip Code

FILED

Feb 11 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

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, and accept the obligations of, Section 607.0505, Florida Statutes.

(NOTE Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE TITLE 1.1 TITLE ☐ Change Addition FRIELING, EDWARD NAME 1.2 NAME 5670 WILLOW CREEK CT. STREET ADDRESS 1.3 STREET ADDRESS DELRAY BEACH FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE Addition 21 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELFTE TITLE 3.1 IIILE Change \_\_\_ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DILLETE TITLE 4.1 THTLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELFTÉ TITLE 61 TITLE ☐ Change ☐ Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 City - St - ZiP

14. Thereby 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 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