CR2E034 (10/02)

FILED

Jan 09, 2003 8:00 am Secretary of State

01-09-2003 90131 018 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

M14795 DOCUMENT

1. Entity Name

Principal Place of Business

DELRAY BEACH FL 33484-6934

5670 WILLOW CREEK CT.

BOCA DELRAY MARINE ENGINEERING INC.



Mailing Address 5670 WILLOW CREEK CT. DELRAY BEACH FL 33484-6934

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2. Principal Place of Business 3. Mailing Address					. DAR DIGITA DIGITA DALAH BIGIR DIGITA DI	
5 670 Willow Creek Court 5670 Willow			ow Greek Gor	<u>f</u>		
Suite, Apt. #, etc. Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES		
Delray Beach Fl. Delray Be			each Fl.	4. FEI Number 65-0099657	Applied For Not Applicable	
334	84 US A	33484	Country VS A	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	Name and Address of Current F	egistered Agent	<u> </u>	7. Name and Address of New Register	<u> </u>	
5670 WIL	i, EDWARD LOW CREEK CT. BEACH FL 33484		Name Street Address	Name Street Address (P.O. Box Number is Not Acceptable)		
DEGIA	DEACH I E 35464		Citý		Zip Code	
SIGNATURE	Signature, typed or printed name of registered agent and	Freling	s registered office or regist E. Registered Agent signature require	red when reinstating)	am familiar with, and accept	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				Selection Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND D		11.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	P FRIELING, EDWARD 5670 WILLOW CREEK CT. DELRAY BEACH FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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SIGNATURE:

12. I hereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.