

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M15039

1. Entity Name

WORLD MARINE SERVICES, INC.

FILED
Feb 10, 2000 8:00 am
Secretary of State

02-10-2000 90054 037 ***150.00

Principal Place of Business

8920 SW 163RD TERR
MIAMI FL 33157
US

Mailing Address

8920 SW 163RD TERR
MIAMI FL 33197-0588
US

2. Principal Place of Business

524 E. 30th St.

Suite, Apt. #, etc.

3. Mailing Address

524 E. 30th St.

Suite, Apt. #, etc.

City & State

Hialeah, FL

City & State

Hialeah, FL

4. FEI Number

59-2533745

Applied For

Not Applicable

Zip

33013

Country

U.S.A.

Zip

33013

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAMAREDDINE, FAROUK
8920 SW 163RD TERR
MIAMI FL 33157

Name

JOHN F. WARD

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

10425 S.W. 48TH PL.

City

GAINESVILLE

FL

Zip Code

32608-7173

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPT
NAME KAMAREDDINE, FAROUK ☐ Delete
STREET ADDRESS 8920 SW 163RD TERR
CITY-ST-ZIP MIAMI FL 33157

TITLE DPT ☒ Change ☐ Addition
NAME FAROUK KAMAREDDINE
STREET ADDRESS 413 PINNACLE HEIGHTS LANE
CITY-ST-ZIP LAS VEGAS, NV 89144-0804

TITLE S ☐ Delete
NAME KAMAREDDINE, JILL S.
STREET ADDRESS 8920 SW 163RD TERR
CITY-ST-ZIP MIAMI FL 33157

TITLE S ☒ Change ☐ Addition
NAME JILL S. KAMAREDDINE
STREET ADDRESS 413 PINNACLE HEIGHTS LANE
CITY-ST-ZIP LAS VEGAS, NV 89144-0804

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jill S. Kamareddine
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 25, 2000 (702)254-5163

Date Daytime Phone #

CR2E034 (9/99)