FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

M51002

(7)

LASER MARINE, INC.

FILED May 08 1998 8:00am Secretary of State

A CRAINGIL DES ARIAS CORS ARRIS DELLE RESID 1881 ACRES ARRIS DIGIT ACRES ASSIS ACRES 1881

Principal Place of Business Mailing Address						, 18846814 194 20191 (184) BENN SANIS (181 2181) BIBN BIBN 21811 BIBN BIBN 18841 1884				
	3000 N FEDERAL HWY LIGHTHOUSE POINT FL 33064 US	LIGHTHOUSE POI	3000 N FEDERAL HWY LIGHTHOUSE POINT FL 33064 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
	•									
							04/27/1987		,	
2.	Principal Place of Business	2a. Mailing Address	2a. Mailing Address			4. F	4. FEI Number		Applied For	
21	<u> </u>	26	ð			<u> </u>	59-2828876		Not Applicable	
22	Sulte, Apt. #, etc	Suite, Apt. #, etc	Suite, Apt. #, etc.			6. C	Certificate of Status Desired		5 Additional Required	
23	City & State	Gity & State	"			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
24	Zip Country 25	21p	30 Cou	intry		1	his corporation owes or has paid the cu Personal Property Tax due June 30.	rent yea Yes	r Intangible	
Name and Address of Current Registered Agent MASON, TYOMAS 3010 N FEDERAL HWY LIGHTHOUSE POINT FL 33064					10. Name and Address of New Registered Agent					
						ss (P.C	O Ramos D. Box Number is Not Acceptable) Federal Highway			
				83	Light	Lighthouse Point, FL 33064				
				84	City		EI	85	Zip Code	

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. In familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

(NOTE Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition P MASON, THOMAS 1.2 NAME Reinaldo Ramos 2859 NE 18 ST STREET ADDRESS 1.3 STREET ADDRESS 3000 N. Federal Highway POMPANO BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Lighthouse Point, FL DELETE 2.1 TITLE TITLE RAMOS, REINALDO NAME 2.2 NAME 11950 NW 18TH COURT 2.3 STREET ADDRESS STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition TITLE 5.130UE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - ST- ZiP DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

CITY-ST-ZIP

4-30-98

954-781-2800