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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M89943

(8)

JDM MARINE TECHNOLOGY, INC.

FILED Apr 11 1997 8:00am Secretary of State

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Principal Place of Business * JOHN D. MCKAY, II 11288 N.W. 12TH CT. CORAL SPRINGS FL 33071 2. Principal Place of Business		11288 N.W. 12TH C CORAL SPRINGS F	Mailing Address # JOHN D. MCKAY, II 11288 N.W. 12TH CT. CORAL SPRINGS FL 33071-6410 2a. Mailing Address			3. Date Incorporated or Qualified				
21		26				65-0063618			Not Applicable	
Suite, Apt	#, etc.	Suite, Apt #, e	etc.			5, Certificate of Status Desired			75 Additional e Regulred	
City & Sta	te	City & State	City & State		6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to F					
Z(p)	Zip Country Zip			ntry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered #	gent		
	KAY, JOHN D., II		i	61	Name					
	11288 N.W. 12TH CT. CORAL SPRINGS FL 33071				Street Addr	ess (P.O. Box Number is Not Acceptab	lø)			
ļ			[-	83						
! 			ļ	84	City		FL	85	Zip Code	
SIGNATURE	Signature, typed or printed name of registered	agent and title 1 appscable.	(NOTE: Registered	Ageni	signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CFRS AND	DIREC	TORS IN 12	
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NAME	MCKAY, JOHN D., II		1.2 NAI		ì				•	
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NAME	MCKAY, MARY A.		2.2 NAI							
STREET ADDRESS CITY-ST-ZIF	11288 N.W. 12TH CT. CORAL SPRGS. FL		2.4 CII		DDRESS	~ ·				
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I. I do 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 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

COLATURE AND TYPED OR PRINTERS AMERICAN OFFICER OF THREETOR

4-8-97 954341-7641