

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 03, 2002 8:00 am
Secretary of State

04-03-2002 90033 049 ***150.00

DOCUMENT # P00000035732

1. Entity Name

Harbor Marine Engineering Co., Inc.

DO NOT WRITE IN THIS SPACE

80058552

2. Principal Place of Business

3200 N. Ocean Blvd.

Suite, Apt. #, etc.

2105

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

Fort Lauderdale, Fl.

City & State

Zip

33308

Country

Broward

Zip

Country

4. FEI Number

65-1003647

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Louis Marcianite

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

3200 N. Ocean Blvd., #2105

City

Fort Lauderdale

FL

Zip Code

33308

**DO NOT WRITE
IN THIS SPACE**

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

Louis Marcianite

LOUIS MARCIANTE

PRESIDENT

3/12/02

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)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE	PRESIDENT
NAME	Louis Marcianite
STREET ADDRESS	3200 North Ocean Blvd., #2105
CITY-ST-ZIP	Fort Lauderdale, Fl. 33308

TITLE	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Louis Marcianite

LOUIS MARCIANTE

3/12/02

954

553-0048

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)