

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90167 042 ***150.00

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DOCUMENT # P00000098959

1. Entity Name
WHEELER MARINE SERVICES, INC.



Principal Place of Business
617 SW 5TH AVE
FT LAUDERDALE FL 33315-1023

Mailing Address
617 SW 5TH AVE
FT LAUDERDALE FL 33315-1023



2. Principal Place of Business

757 SE 17 ST

3. Mailing Address

757 SE 17 ST

Suite, Apt. #, etc.

Box # 197

Suite, Apt. #, etc.

Box # 197

City & State

FORT LAUDERDALE FL

City & State

FORT LAUDERDALE FL

4. FEI Number

65-1074908

Applied For

Not Applicable

Zip
33316

Country

USA

Zip
33316

Country

USA

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WHEELER, BRUCE
617 SW 5TH AVE
FT LAUDERDALE FL 33315-1023

7. Name and Address of New Registered Agent

Name
WHEELER, BRUCE
Street Address (P.O. Box Number is Not Acceptable)

1435 SW 28 ST

City
FORT LAUDERDALE

FL

Zip Code

33315

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Bruce A. Wheeler** **BRUCE WHEELER**

APR. 23, 2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WHEELER, BRUCE
617 SW 5TH AVE
FT LAUDERDALE FL 33315-1023

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WHEELER, BRUCE
1435 SW 28 ST
FORT LAUDERDALE FL 33315

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Bruce A. Wheeler** **BRUCE WHEELER** **APR. 23, 2003**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)