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FILED
Jul 09, 2002 8:00 am
Secretary of State

05-01-2002 91573 004 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000045334

1. Entity Name
BRUCE MARINE SALES & SERVICE, INC.

[redacted]

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
~~3810~~ 4109 SOUTH 50TH STREET (HIGHWAY 41) TAMPA FL 33619	~~3810~~ 4109 SOUTH 50TH STREET (HIGHWAY 41) TAMPA FL 33619

2. Principal Place of Business	3. Mailing Address
4109 South 50 St.	4109 South 50 St
Suite, Apt. #, etc. (Hwy 41)	Suite, Apt. #, etc. (Hwy 41)
City & State Tampa Fl	City & State Tampa Fl
Zip 33619 Country	Zip 33619 Country

4. FEI Number 59-3715730 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~SPIEGEL & UTRERA, P.A.~~
~~348 ALHAMBRA AVENUE~~
~~CORAL GABLES FL 33134~~

Jeffrey A Dowd
PO Box 6190
Brandon Fl 33508

7. Name and Address of New Registered Agent

Name JEFFREY A. DOWD, P.A.
Street Address (P.O. Box Number is Not Acceptable) 550 NORTH REO STREET - SUITE 302
~~TAMPA, FLORIDA 33609~~
City TAMPA, FL Zip Code 33609

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 X [signature] X 6/27/02
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). ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD MISTRETTA, LOUIS ~~3810 SOUTH 50TH STREET~~ 4109 (HIGHWAY 41) TAMPA FL 33619 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD Mistretta Louis 4109 South 50 (Hwy 41) Tampa Fl 33619 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

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: Louis Mistretta 4/17/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #