

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Oct 01, 2002 8:00 am
Secretary of State

09-09-2002 90007 006 ***150.00

DOCUMENT # P01000091327

1. Entity Name

ROBERT'S MARINE SERVICE, INC.

Principal Place of Business

803 N. 32ND AVE.
 NORTH MIAMI FL 33021

Mailing Address

803 N. 32ND AVE.
 NORTH MIAMI FL 33021

43327

2. Principal Place of Business

803 N. 32ND AVE
 Suite, Apt. #, etc.

3. Mailing Address

803 N. 32ND AVE
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

HOLLYWOOD FL

City & State

HOLLYWOOD FL

4. FEI Number

04-3642420

Applied For

Not Applicable

Zip

33021

Country

USA

Zip

33021

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARANOWSKI, ROBERT C
 803 N. 32ND AVE.
 NORTH MIAMI FL 33021

7. Name and Address of New Registered Agent

Name: BARANOWSKI ROBERT C
 Street Address (P.O. Box Number is Not Acceptable): 803 N. 32ND AVE
 City: HOLLYWOOD FL Zip Code: 33021

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. PRESIDENT OFFICERS AND DIRECTORS

TITLE: ROBERT C. BARANOWSKI ☐ Delete
 NAME: 803 N. 32ND AVE
 STREET ADDRESS: HOLLYWOOD FL 33021
 CITY-ST-ZIP: 9/15/02

TITLE: ☐ Delete
 NAME: ☐ Delete
 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

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 CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
 NAME: ☐ Change ☐ Addition
 STREET ADDRESS: ☐ Change ☐ Addition
 CITY-ST-ZIP: ☐ Change ☐ Addition

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 CITY-ST-ZIP: ☐ Change ☐ Addition

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:

Robert C. Baranowski
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/02

0954-257-4451
 0954-962-0936

Date

Daytime Phone #

CR2E034 (4/02)