

FILED

Apr 22, 2005 08:
Secretary of S**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000122558

Name
WORLD MARINE, INC.

Principal Place of Business

450-106 STATE ROAD 13

SUITE 138

JACKSONVILLE, FL 32259 US

Mailing Address

450-106 STATE ROAD 13

SUITE 138

JACKSONVILLE, FL 32259 US



04212005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3723712	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

FRAZER, DAVID A
450-106 STATE ROAD 13
SUITE 138
JACKSONVILLE, FL 32259**DO NOT WRITE
IN THIS SPACE**

6. 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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**U00000324163
04/22/05-80084-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	FRAZER, DAVID A
STREET ADDRESS	135 SWEETBRIER BRANCH LN
CITY - ST - ZIP	JACKSONVILLE, FL 32259

TITLE	
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NAME	
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CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-05

Date

904-608

Daytime Phone