2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2007 8:00 am Secretary of State

DOCUMENT # P06000020894 1. Entity Name DETAILING MARINES INC					05-03-2007 9	0061 038 ***150	0.00
Principal Place 2351 NW 60 SUNRISE, FL		Mailing Address 2351 NW 60 TERR SUNRISE, FL 33313 US		I U A		11110 (1611 1810) (2016 (1811) (1811)	
	lace of Business - No P.O. Box #	3. Mailing Address	• /				
Suite, Apt.		23 57 HW-60 Te Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	04172007	Chg-P	CR2E034 (12/06)	
City & Stat	Sunrise FC	City & State Sun (is	se FL	4. FEI Number	30723	Ar Ar	oplied For ot Applicable
Zip 33		Zip 33313 , Co.	FLOTIDE	5. Certificate of		\$8.75 Add	ditional
	6. Name and Address of Current R		1	7. Name and A	ddress of New Re		
Name							
SIMMONS, JIMMEL 2351 NW 60 TERR SUNRISE, FL 33313			Street Address (P.O. Box Number is Not Acceptable)				
SUNNISE,	16 33313						
			City			FL Zip Cod	e
	named entity submits this statement for ions of egistered agent.	the purpose of changing its register	ered office or registe	red agent, or both,	in the State of Flori	ida. I am familiar with,	and accept
SIGNATURE Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registered Agent signature required when remstang) Ou/36/07 DATE							
$-\!\!\!/-$	agraduse, typica or princer turns or registerior special	to me in appearable. (NOTE, registe	ared Agent agnature require	o wiren (enistating)		· DATE	
	E NOW!!! FEE IS \$150.00 - ay 1, 2007 Fee will be \$550.0	9. Election Campaign Fin Trust Fund Contribution		.00 May Be ded to Fees			
10.	OFFICERS AND D	DIRECTORS 1	1.	ADDITIONS/CI	HANGES TO OFFIC	ERS AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SIMMONS, JIMMEL 2351 NW 60 TERR SUNRISE, FL 33313	N ST	ITLE AME TREET ADDRESS			☐ Change	☐ Addition
TITLE		1 Li	ITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP	President Jimmel Simmons 2351 HW60 Ferr Sun Pise EL 833	Delete TI	ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP			☐ Change	Addition
STREET ADDRESS	Jimmel Simmons 2351 NW 60 Ferr Sun Pise pl 333. Protent Jimmed Simmons 2351 NW 60 Terr	Delete TI NV SI CI Delete TI NV SI SI SI SI SI SI SI SI	ITLE AME TREET ADDRESS			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Jimmel Simmons 2351 NW 60 Ferr Sun Pise pl 333. Present Jimmed Jimmons 2351 NW 60 Terr Sun Pise pl 33713 President Jimmel Simmons 2351 NW 60 Terr Sunrise pl 33813	Delete TI NV SI CI Delete TI NV SI CI Delete TI NV SI CI CI Delete TI NV SI CI CI SI	ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Jimmel Simmons 2351 HW 60 Ferr SUN PISE PL 333. PRESENT Jimmed Jimmons 2351 HW 60 Terr SUNPISE PL 35713 PRESIDENT Jimmed Simmons 2551 HW 60 Terr SUNPISE PL 33813 PRESIDENT JIMMEL SIMMONS 2551 HW 60 TERR BIMMEL SIMMONS 3181 HW 60 TERR	Delete Ti Nv SI Ci Delete Ti Nv SI Ci Delete Ti Nv SI Ci Delete Ti Nv SI	ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Jimmel Simmons 2351 HW 60 Ferr SUN PISE PL 333. Present Jimmed Jimmons 2351 HW 60 Terr SUNPISE PL 35713 President Jimmel Simmons 2351 HW 60 Terr Sunrise PL 33313 President Sunrise PL 33313	Delete TI NV SI CI NV SI CI NV SI NV	ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS			☐ Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

04/50/07

754-425-8216

Date

Daytime Phone #