

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P07370 (0)  
1. Corporation Name  
LUCENTI MARINE SALES, INC.

Principal Place of Business Mailing Address  
~~5010 RIDGEWOOD AVENUE~~  
~~PORT ORANGE FL 32127~~  
~~5010 RIDGEWOOD AVENUE~~  
~~PORT ORANGE FL 32127~~

FILED  
Aug 08 1997 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 4259 CARDINAL BLVD		26 4259 CARDINAL BLVD		09/11/1985		05/01/1996	
Sulte, Apt. #, etc.		Sulte, Apt. #, etc.		4. FEI Number		Applied For	
22		27		55-0451435		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 DAYTONA BEACH, FL		28 DAYTONA BEACH, FL		6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip Country		Zip Country		Trust Fund Contribution		<input type="checkbox"/>	
24 32127 25 VOLUSIA		29 32127 30 VOLUSIA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LUCENTI, JOHN V. 5010 RIDGEWOOD AVENUE PORT ORANGE FL 32127				81 Name MARY K. LUCENTI			
				82 Street Address (P.O. Box Number is Not Acceptable) 4259 CARDINAL BLVD			
				83			
				84 City DAYTONA BEACH FL			
				85 Zip Code 32127			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Mary K. Lucenti*

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

(NOTE: Registered Agent signature required when reinstating)

7-29-97

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE		11 TITLE P	MARY K. LUCENTI	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	LUCENTI, JOHN V.			12 NAME	4259 CARDINAL BLVD		
STREET ADDRESS	4259 CARDINAL BLVD			13 STREET ADDRESS	DAYTONA BEACH, FL 32127		
CITY-ST-ZIP	DAYTONA BEACH FL			14 CITY-ST-ZIP	DAYTONA BEACH, FL 32127		
TITLE	S	<input checked="" type="checkbox"/> DELETE		21 TITLE VAST	JOHN J. ORTIZ	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Lollar, BETTY M.			22 NAME	4253 CARDINAL BLVD		
STREET ADDRESS	4090 W. ATMORE CIRLE			23 STREET ADDRESS	DAYTONA BEACH, FL 32127		
CITY-ST-ZIP	DAYTONA FL			24 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		31 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				32 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY-ST-ZIP				34 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		41 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY-ST-ZIP				44 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		51 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		61 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 CITY-ST-ZIP			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Mary K. Lucenti*

*Mary K. Lucenti*

CR2E034 (4/97)