

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000047283

Entity Name: MARINE CARE USA INC.

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

2070 D&E TIGERTAIL BLVD. BLD.#2  
DANIA BEACH, FL 33004

## **New Principal Place of Business:**

2070 D&E TIGERTAIL BLVD. BLD.#2  
SUITE D  
DANIA BEACH, FL 33004

## **Current Mailing Address:**

2070 D&E TIGERTAIL BLVD. BLD.#2  
DANIA BEACH, FL 33004

## **New Mailing Address:**

2070 D&E TIGERTAIL BLVD. BLD.#2  
SUITE D  
DANIA BEACH, FL 33004

FEI Number: 27-0291773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

DE RUITER, GUNTER  
158 GOLF AIR BLVD  
HAINES CITY, FL US

## **Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: DE RUITER, GUNTER  
Address: 158 GOLF AIR BLVD.  
City-St-Zip: HAINES CITY, FL

Title: D  
Name: DE RUITER, MICHAEL  
Address: 158 GOLF AIR BLVD  
City-St-Zip: HAINES CITY, FL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GUNTER DE RUITER

D

04/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date