FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P12788

(6)

AMERICAN MARINE HOLDINGS, INC.

Mailing Address Principal Place of Business 1520 S. SUNCOAST BLVD. 1520 S. SUNCOAST BLVD. HOMOBASSA FL 34448-1463 HOMOSASSA FL 32646 3. Date Incorporated or Qualified 3a. Date of Last Report 06/25/1996 01/06/1987 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-2745631 11(0 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt #, etc 5. Certificate of Status Desired 22 City & State Sarasota \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution

FILED Jan 31 1997 8:00am Secretary of State

Applied For

Fee Required

Added to Fees

Not Applicable



Zip	Country	Zip > U \ U >	Cour		usA	8. This corporation has liability for intangible tax under s. 199.032.		
24 25 29 3 4145 30 9. Name and Address of Current Registered Agent			[30]	Florida Statutes Y Yes 1				
7110			81	Name	10. Name and Address of New Negliste	red Agent		
	PRENTICE HALL CORP. SYSTEM	INC		ا"	Hame			
1201 HAYS STREET SUITE 105				82 Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301				83	······································			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
It shows a negation 1 or agree 1			ļ					
				84	City		FL 85 Zip (Code
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 +am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
				21000	n organization of the special of the	ADDITIONS/CHANGES TO OFFICERS		S IN 12
TITLE	CD	DELETE	13. 1.1 Till	ΓLE			☐ Change	Addition
NAME	ranieri, Lewis A.		1.2 NA	ME				
STREET ADDRESS	50 CHARLES LINDBERGH BLVD, STE 500			REET	ADDRESS .			
CITY-ST-7/P	UNIONDALE NY		1.4 CI	TY - 51	-ZIP			
TITLE	VP	☐ DELETE	2.1 TIT	LE			Change	Addition
NAME	SPENCER, DONALD M		2.2 NA	ME				
STREET ADDRESS	DONZI MARINE, 7110 21ST ST EAST			23 STREET ADDRESS				
CITY-SI-ZIF	SARASOTA FL		2 4 0	ITY-S	T-21P			
TITLE	EVID	☐ DELETE	31 111	rle			☐ Change	■ Addition
NAME	WILSON, KENDRICK R III		32 NA	ME		•		
STREET ADDRESS	ONE ROCKEFELLER PLAZA		3.3 ST	REET	ADDRESS			
CITY-SI-ZIP	NEW YORK NY		34. C		T-ZIP			TT
TITLE	EVD LEG N	☐ DELETE	4.1 111				☐ Change	Addition
NAME	KIMMEL, LEE H	ND	4.2 N					
STREET ADDRESS	499 PARK AVENUE, 22ND FLOO NEW YORK NY	ın.			ADDRESS			
CITY - S1 - ZIP	VCD VCD	☐ DELETE	4.4 CI		r- ZIP		Change	Addition
TITLE	ATWOOD, DANIEL R	☐ VELETE	5.1 717				- Cusude	Mudicion
NAME	1520 SO SUNCOAST BOULEVAL	DD.	5.2 NA					
STREET ADDRESS	HOMOSASSA FL				ADORESS			
CITY-ST-ZIP	PCEO	7.		TY-ST TLE	50		Change	Addition
TITLE	HALL, KEN				700	ILIUR, RIKE	First Accorde	Managari
NAME DAVISOR LODGESTA	1520 SO SUNCOAST BOULEVAL	RU	6.2 NA		1000000 C.	illus, Rike was morne, 7110 21st	stie.	
STREET ADDRESS	HOMOSASSA FL				ADDRESS 100	arasofa, F(34243		
C/TY-ST-ZIP	TOTAL CONTROL OF THE PARTY OF T		6.4 CI	1Y-S	1-ZIF	COUNTY FINANCE	Alle and a series of the series	Ab -

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:

SIGNING OFFICER OR DIRECTOR