

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000000090 (9)

1. Corporation Name

INTERNATIONAL MARINE ENTERPRISES, INC.



Principal Place of Business

103RD STREET  
ARCHER FL 32618

Mailing Address

% KIM ST. JAMES, ESQ.  
1645 PALM BEACH LAKES BLVD., #1060  
W. PALM BEACH FL 33401

2. Principal Place of Business

21 17314 S.W. 103 PL

Suite, Apt. #, etc.

22 City & State  
Archer, FL

23 Zip Country  
32618 U.S.A.

2a. Mailing Address

26 P.O. Box 697

Suite, Apt. #, etc.

27 City & State  
Archer FL

28 Zip Country  
32618 USA

3. Date Incorporated or Qualified  
12/31/1992

3a. Date of Last Report  
08/14/1995

4. FEI Number  
59-3158124

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ST. JAMES, KIM ESQ  
UNITED NATIONAL BANK BLDG., SUITE 1060  
1645 PALM BEACH LAKES BLVD.  
W. PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name Lisa Michel

82 Street Address (P.O. Box Number is Not Acceptable)  
17314 S.W. 103rd PL

83

84 City Archer

FL

85 Zip Code  
32618

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 Lisa M. Michel

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

(NOTE: Registered Agent's signature required when re-appointing)

3/28/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
D	MICHEL, SHERWOOD	103RD STREET	ARCHER FL 32618	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
S	Lisa Michel	17314 S.W. 103rd PL	Archer, FL 32618	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Lisa M. Michel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/96 (362) 495-2639

DATE

DAYTIME PHONE

CR2E034 (12/95)