2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P93000000860** May 01, 2000 8:00 am 1. Entity Name Secretary of State DANIEL WEBSTER MARINE SERVICES, INC. 05-01-2000 90368 026 ***150.00 Mailing Address Principal Place of Business 1622 SW 25TH ST. 1622 SW 25TH ST FT. LAUDERDALE FL 33315-2211 STE 316 FT LADUERDAEL FL 33315 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0378705 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WEBSTER, DANIEL Street Address (P.O. Box Number is Not Acceptable) 1622 SW 25TH ST. FT LAUDERDALE FL 33315 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITI F ☐ Change ☐ Addition ☐ Delete TITLE WEBSTER, DANIEL NAME NAME STREET ADDRESS STREET ADDRESS 1622 SW 25TH ST CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Change ☐ Addition TITLE ☐ Delete TITLE WEBSTER, SHANNON P NAME NAME STREET ADDRESS STREET ADDRESS 1622 SW 25TH CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33315 -- Delete → TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 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 on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE: DANIEL P. W. 665 FOR CANAL WILLIAM 4-19-00 (954)524-936

changed, or on an attachment with an address, with all other like empowered