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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000033199 (9)

INDEPENDENT MARINE OIL SERVICES, CORP.

Principal Place of Business Mailing Address P. O. BOX 570669 POB 1750 MIAMI FL 33257-0669 JUPITER FL 33468-1750 2. Principal Place of Business 2a. Mailing Address 21 26

FILED Feb 09 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 05/06/1993 4. FEI Number Applied For 65-0423189 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 10, Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name BUTLER, JAMES A 12039 169TH CT N 82 Street Address (P.O. Box Number is Not Acceptable) **JUPITER FL 33478** 83 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typied or printed name of registered agent and time if applicable (NOTE: Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change **BUTLER, JAMES A** 1.2 NAME NAME STREET ADDRESS 12039 169TH CT N 1.3 STREET ADDRESS JUPITER FL 33478 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 21 TITLE ☐ Change ___ Addition **BUTLER, JOHANNA S** NAME 2.2 NAME 12039 169TH CT N STREET ADDRESS 2.3 STREET ADDRESS JUPITER FL 33478 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAM8 STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-S1-ZIP DELETE ☐ Change Addition TITLE 41 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE DELETE 6.1 TITLE Change 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 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 chapted, or on an attachment with an address.

SIGNATURE:

JAMES A BUTTURE:

JAMES A BUTTURE:

SIGNATURE

JA. 30 1998