FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 APR 19 AM 1:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000035089 (0)

1. Corporation Name
AEROMARINE INTERNATIONAL, INC.

Principal Place of Business
~~[illegible]~~
~~[illegible]~~
182½ BELMONT DR.
Grand Junction, CO. 81501

Mailing Address
~~[illegible]~~
~~[illegible]~~
2830 North Av. #500
Grand Junction, CO 81501

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 182 ½ BELMONT DR.
Suite, Apt. #, etc.
22
City & State
23 Grand Junction, CO.
Zip
24 81501
Country
25 USA

2a. Mailing Address
26 2830 NORTH AVE.
Suite, Apt. #, etc.
27 500
City & State
28 Grand Junction, CO
Zip
29 81501
Country
30 USA

3. Date Incorporated or Qualified: 05/14/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0411451 ☐ 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

COX, CHARLES W
757 S.E. 17 ST.
SUITE 500
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent
81 Name: PETER COLEMAN
82 Street Address (P.O. Box Number is Not Acceptable): 757 S.E. 17th ST. #500
83
84 City: Ft. Lauderdale FL
85 Zip Code: 33316

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 CHARLES W. COX - President
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME COX, CHARLES W
STREET ADDRESS 757 S.E. 17TH ST., #500
CITY-ST-ZIP FT. LAUDERDALE FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE President ☑ Change ☐ Addition
1 2 NAME COX, Charles. W.
1 3 STREET ADDRESS 2830 North Ave. #500
1 4 CITY-ST-ZIP Grand Junction, CO. 81501

2 1 TITLE ☐ Change ☐ Addition
2 2 NAME
2 3 STREET ADDRESS
2 4 CITY-ST-ZIP

3 1 TITLE ☐ Change ☐ Addition
3 2 NAME
3 3 STREET ADDRESS
3 4 CITY-ST-ZIP

4 1 TITLE ☐ Change ☐ Addition
4 2 NAME
4 3 STREET ADDRESS
4 4 CITY-ST-ZIP

5 1 TITLE ☐ Change ☐ Addition
5 2 NAME
5 3 STREET ADDRESS
5 4 CITY-ST-ZIP

6 1 TITLE ☐ Change ☐ Addition
6 2 NAME
6 3 STREET ADDRESS
6 4 CITY-ST-ZIP

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: - CHARLES W. COX 4/4/95 303-245-0889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #