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

P93000051486 (7) DOCUMENT # 1. Corporation Name

MARINO BOATS, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business		Mailing	Mailing Address				
1157 N DIXIE FREEWAY		1157 h	1157 N DIXIE FREEWAY				
NEW SMYRNA BEACH FL 32188		NEW S	NEW SMYRNA BEACH FL 32168				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							07/14/1993
2. Principal Place of Bu		A. Mai	ling Address				
—	ISINUSS		iing Address				
21		Suite, Apt. #, etc.					59-3 197973 Not Applicable \$8.75 Additional
Sulte, Apt. #, etc.		<u></u> ⊢¬	е, ярт. я, етс.				5. Certificate of Status Desired Fee Regulred
City & State		27 Cit.	& State				
23	· · ·	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country Zip		Col	Country		This corporation owes or has paid the current year Intangible	
24	25	29		30	,, ic. y		Personal Property Tax due June 30. X Yes No
o Nat	me and Address of Curre		Agent	30	Ι		10. Name and Address of New Registered Agent
					81	Name	
GYLLENBERG, NILS S 1157 N DIXIE FREEWAY							
		[8			Street	et Address (P.O. Box Number is Not Acceptable)	
LIEAL OWILL	NA BEACH FL 32168				83	ļ	
·					84	City	FL 85 Zip Code
		00 007 11	OD Fledde Cree	ton the n		<u> </u>	ed corporation submits this statement for the purpose of changing its registered
 office or registered. 	agent, or both, in the State	e of Florida S	uch chan ce w as:	authorize	d by	v the cor	orporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar	with, and accept the oblig	ations of, Sec	ction 607. 0505 , Fl	orida Sta	lules	S .	
SIGNATURE	- 			v 8			ure roquirud when roinstating) DATE
	ped or pointed name of regrets malag OFFICERS AN			13.	o Age	eni signature	one required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	CITION NO	101111111111111111111111111111111111111	DELETE	1.1 T)	TLF		Change Addition
	ENBERG, NILS S			1.2 N			
	N DIXIE FREEWAY					ADDRESS	
NENA	SMYRNA BEACH FL 32	2168				ST-ZIP	"
CITY-ST-ZIP NEVY			DELETE	2.1 11		51-2IF	Change Addition
NAME				2.2 N			
STREET ADDRESS						ADDRESS	e
; ;						ST-ZIP	<u> </u>
CITY-ST-ZIP TITLE			DELETE	3.1 TI		31-2Ir	Change Addition
NAME				3.2 N	-		
STREET ADDRESS						ADDRESS	c l
!						ST-ZIP	Ĭ
CITY-ST-ZIP TITLE			DELETE	4.1 TI	_	O1-EIL	Change Addition
NAME			<u> </u>	4.21			_ , _
STREET ADDRESS						ADDRESS	
] *						ST-ZIP	~ {
CITY-ST-ZIP TITLE			DELETE	5.1 TI		11-211	☐ Change ☐ Addition
NAME				5.2 N			
						I ADDRESS	
STREET ADDRESS							~ <u> </u>
CITY-ST-ZIP TITLE			DELETE	5.4 C		51 - ZIP	Change Addition
i			Las Siccit	6.2 N			
NAME OTOGET ADDRESS						I ADDDEGG	_
STREET ADDRESS						ADDRESS	⁸
CITY-ST-ZIP				6.4 C	ITY - S	ST-ZIP	1

14. Thereby 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.