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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000056390 (6)

CARY MARINE SALES & BUILDING CORP.

Principal Place of Business Mailing Address P. O. BOX 419002 6917 COLLINS AVENUE MIAMI BEACH FL 33141-9002 STE. 1611 MIAMI BEACH FL 33141 3. Date Incorporated or Qualified 3a. Date of Last Report 08/09/1993 08/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0429266 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country 2₍₁₎ Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **NESTOR, BRENDA** 6917 COLLINS AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) STE. 1611 83 MIAMI BEACH FL 33141 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition LILE 1.1 TITLE **NESTOR, BRENDA** 1.2 NAME NAME 6917 COLLINS AVE 1.3 STREET ADDRESS STREET ADORESS MIAMI BEACH FL 4 CUTY ST ZIP CITY - ST - ZIP DELETE 2.1 TITLE TITLE STRASSBERG, BLANCHE 2 NAME 6917 COLLINS AVE. STREET ADDRESS 2.3 STREET ADDRESS MIAMI BCH. FL 2. 4 CITY-ST-ZIP CITY - ST - 74P DELETE Addition 3.1 TITLE TOLE STRASSBERG, BLANCHE 3.2 NAME NAME 6917 COLLINS AVE. 3.3 STREET ADDRESS STREET ADDRESS MIAMI BCH. FL 3.4. CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition 41 TITLE TITLE COLVIN, MELVIN 4. 2 NAME NAME 6917 COLLINS AVE. 4.3 STREET ADDRESS STREET ADDRESS MIAMI BCH. FL 4.4 CITY - ST (ZIP CITY-ST-ZIP DELETE rman (CEO Director 5.1 TITLE TIFLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - \$1 - 7IP DELETE Change Addition 6.1 TITLE THEF

64 CITY-ST-ZIP 14. I do 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 changed, or on an example of the corporation of the cor

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIE

FILED

May 12 1997 8:00am

Secretary of State