

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90128 025 \*\*\*150.00

DOCUMENT # P93000063998

1. Corporation Name  
STEVE'S MARINE DESIGNS INC.

Principal Place of Business

3653 NW 124 AVENUE  
CORAL SPRINGS FL 33065  
US

Mailing Address

~~PO BOX 770872  
CORAL SPRINGS FL 33077  
US~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1993

4. FEI Number

65-0437017

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 owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 TAPP, STEVEN L  
3088 N.W. 94 AVE.  
CORAL SPRINGS FL 33065

2a. Mailing Address

26 3653 NW 124 Ave

27 Suite, Apt. #, etc.

28 Coral Springs FL

29 33065 30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

Anita F. Tapp

82 Street Address (P.O. Box Number is Not Acceptable)

3088 NW 94 AVE

83

84 City

Coral Spgs.

FL

85 Zip Code

33065

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 Anita F. Tapp Pres.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-3-99

12. OFFICERS AND DIRECTORS

TITLE P  
NAME TAPP, STEVEN L.  
STREET ADDRESS 3088 N W 94TH AVENUE  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE ST  
NAME TAPP, ANITA F.  
STREET ADDRESS 3088 N W 94TH AVE  
CITY-ST-ZIP CORAL SPRINGS FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME TAPP ANITA F.  
1.3 STREET ADDRESS 3088 NW 94 AVE  
1.4 CITY-ST-ZIP CORAL Spgs FL 33065

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anita F. Tapp Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-99

Date

9547524360

Daytime Phone #

CR2E034 (11/98)