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 # P93000080112 (4)

FRONTIER MARINE, INC.

FILED Feb 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 412 SE 17TH ST % ACCOUNTING & BUSINESS CONSULTANTS INC FT LAUDERDALE FL 33316 790 E BROWARD BLVD #302 DO NOT WRITE IN THIS SPACE FT LAUDERDALE FL 33301 3. Date Incorporated or Qualified 11/19/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0450672 21 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 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 6. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name RUIZ, NICOLAS C/O RICHAMN MARINE Street Address (P.O. Box Number is Not Acceptable) 412 SE 17TH STREET 83 FT LAUDERDALE FL 33316 84 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE X Addition **RUIZ, NICOLAS** NAME 1.2 NAME 412 SE 17TH ST STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change X Addition TITLE 21 TITLE VP RUIZ, DONNA NAME 22 NAME 412 SE 17TH ST STREET ADDRESS 23 STHEET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 2.4 DITY-ST-ZIP DELETE TITLE Change ___ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS QITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS **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.

MONATURE - 1 1 1 2

2/1/00