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2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 04, 2002 8:00 am
Secretary of State

05-28-2002 91638 036 ***550.00

DOCUMENT # P93000080112

1. Entity Name

FRONTIER MARINE, INC.

Principal Place of Business

Mailing Address

412 SE 17TH ST
 FT LAUDERDALE FL 33318
 US

17 ROSE DRIVE
 FT LAUDERDALE FL 33316
 US

37840



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0450672

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUIZ, NICOLAS

RUIZ, NICOLAS

~~C/O RICHAMN MARINE~~

P.O. BOX 7409

~~412 SE 17TH STREET~~~~FT LAUDERDALE FL 33318~~

JUPITER, FL 33468

Name

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

140 Intracoastal Point Drive Ste 410

City Jupiter

FL

Zip Code 33477

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE NICOLAS A. RUIZ (P)

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

(NOTE: Registered Agent signature required when reinstating)

5/3/02

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**
 NAME **RUIZ, NICOLAS**
 STREET ADDRESS **412 SE 17TH ST**
 CITY-ST-ZIP **FT LAUDERDALE FL 33318**
☐ Delete

P.O. BOX 7409
JUPITER, FL 33468

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition
140 Intracoastal Point Drive Ste 410
Jupiter FL 33477

TITLE **VP**
 NAME **RUIZ, DONNA**
 STREET ADDRESS **412 SE 17TH ST**
 CITY-ST-ZIP **FT LAUDERDALE FL 33318**
☒ Delete

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 5/3/02 (561) 818-0808

Date

Daytime Phone #

CR2E034 (9/01)