

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

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90053 021 \*\*\*\*\*8.75
03-02-1999 90053 022 \*\*\*150.00

PROFIT CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P94000041455

1. Corporation Name
TECHNO MARINE CORP.

Principal Place of Business
9735 NW 52 ST
SUITE 115
MIAMI FL 33178
US
Mailing Address
9735 NW 52 ST
SUITE 115
MIAMI FL 33178
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
06/02/1994
4. FEI Number
65-0496370
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.

2. Principal Place of Business
2a. Mailing Address
21. Suite, Apt. #, etc.
26. Suite, Apt. #, etc.
22. City & State
27. City & State
23. Zip
Country
25. Zip
Country
29. Zip
Country
30.

9. Name and Address of Current Registered Agent
ESPARRAGOZA, IVAN
9735 NW 52 ST
SUITE 115
MIAMI FL 33178

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. 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) DATE

Table with 2 columns: OFFICERS AND DIRECTORS, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include fields for Title, Name, Street Address, City-ST-ZIP, and a DELETED checkbox.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include fields for Title, Name, Street Address, City-ST-ZIP, and checkboxes for Change and Addition.

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: [Signature] 01/08/99 (305) 640-9765
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
IVAN ESPARRAGOZA
Date Daytime Phone #

CR2E034 (1/98)