

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000058364

FILED
Aug 28, 2003
Secretary of State

Entity Name: AQUA MARINE SALE & SERVICE, INC.

Current Principal Place of Business:

6250 NW 126TH PLACE
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

6250 NW 126TH PLACE
CHIEFLAND, FL 32626 US

New Mailing Address:

FEI Number: 59-3262074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN-STEIN, ROBERT
3530 N.W. 97TH BLVD.
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KAPLANSTEIN, ROBERT
Address: 3530 N.W. 97TH BOULEVARD
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: KAPLANSTEIN, DALE
Address: 3530 N.W. 97TH BOULEVARD
City-St-Zip: GAINESVILLE, FL 32606

Title: P () Delete
Name: ALEXANDER, ROBERT,
Address: 6250 NW 126 PL
City-St-Zip: CHIEFLAND, FL 32626

Title: S/T () Delete
Name: ALEXANDER, PAULA,
Address: 6250 NW 126 PL
City-St-Zip: CHIEFLAND, FL 32626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT ALEXANDER

PRES

08/28/2003

Electronic Signature of Signing Officer or Director

Date