

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000059957 (8)

1. Corporation Name

FREEBOARD MARINE, INC.



Principal Place of Business

520 BRICKELL KEY DR.
SUITE 0-303B
MIAMI FL 33131

Mailing Address

520 BRICKELL KEY DR.
SUITE 0-303B
MIAMI FL 33131

2. Principal Place of Business

2a. Mailing Address

21 3100 STRD. 84

26 SAME AS ITEM 2

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 106 / 107

27

City & State

City & State

23 FT LAUDERDALE, FL

28

Zip

Zip

24 33312

Country

Country

25 U.S.

29

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
08/15/1994

3a. Date of Last Report
06/27/1995

4. FET Number
65-0513196

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

NOGUEIRA, EDUARDO
520 BRICKELL KEY DR.
SUITE 0-303B
MIAMI FL 33131

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 607.1506, 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 of Special Agent in Charge or Assistant Secretary

Signature of Registered Agent or Secretary

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME D NOGUEIRA, EDUARDO
STREET ADDRESS 520 BRICKELL KEY DR., #0-303B
CITY-ST-ZIP MIAMI FL 33131

1. TITLE VICE PRESIDENT ☐ Change ☐ Addition
2. NAME DAVID J. ZAREM
3. STREET ADDRESS 3100 ST. RD. 84 SUITE 106-107
4. CITY-ST-ZIP FT. LAUDERDALE, FL 33312

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2. TITLE SECRETARY ☐ Change ☐ Addition
2. NAME BETINA W. ZAREM
2. STREET ADDRESS 3100 ST. RD. 84 SUITE 106-107
2. CITY-ST-ZIP FT. LAUDERDALE, FL 33312

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3. TITLE ☐ Change ☐ Addition
3. NAME
3. STREET ADDRESS
3. CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4. TITLE ☐ Change ☐ Addition
4. NAME
4. STREET ADDRESS
4. CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition
5. NAME
5. STREET ADDRESS
5. CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6. TITLE ☐ Change ☐ Addition
6. NAME
6. STREET ADDRESS
6. CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 I am an officer or director, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TITLE OF REGISTERED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

6/17/96 954-327-7243

CR2E034 (12/95)