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May 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000069017 (9)

1. Corporation Name

T.C. MARINE SERVICES INC.



Principal Place of Business

Mailing Address

1801 N 42 AVE
HOLLYWOOD FL 33021

1801 N 42 AVE
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 937 SE 5 street

2a. Mailing Address

26 937 SE 5 street

Suite, Apt. #, etc.

22 Deerfield Beach FL

Suite, Apt. #, etc.

27 Deerfield Beach FL

City & State

23 33441 Broward

City & State

28 33441 Broward

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CROCKETT, THOMAS J
1801 N 42 AVE
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name Crockett Thomas J
82 Street Address (P.O. Box Number is Not Acceptable)
937 SE 5 street
83 Deerfield Beach FL 33441
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 filer, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME CROCKETT, THOMAS J
STREET ADDRESS 1801 N 42 AVE
CITY-ST-ZIP HOLLYWOOD FL 33021

DELETE

TITLE D
NAME CROCKETT, REGINA M
STREET ADDRESS 2843 KEY LARGO LANE
CITY-ST-ZIP FT LAUDERDALE FL 33312

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP Change Addition

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP Change Addition

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP Change Addition

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP Change Addition

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP Change Addition

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP Change 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.

CP2E034 (10/97)