

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

1995


$$\begin{aligned} & \text{1. 求 } f(x) \text{ 在 } x=0 \text{ 处的导数} \\ & f'(0) = \lim_{x \rightarrow 0} \frac{f(x) - f(0)}{x - 0} \\ & = \lim_{x \rightarrow 0} \frac{x^2 + 2x - 1 - (-1)}{x} \\ & = \lim_{x \rightarrow 0} \frac{x^2 + 2x}{x} \\ & = \lim_{x \rightarrow 0} (x + 2) = 2 \end{aligned}$$

DOCUMENT # **P94000083132 (8)**

RJV MARINE CONSTRUCTION, INC.

APPROVED
AND
FILED

9 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4737 NW 22ND ST COCONUT CREEK FL 33063		4737 NW 22ND ST COCONUT CREEK FL 33063		11/15/1994	
2. Filing Office: FL 33063		2a. Mailing Address:		3. Filing Office: FL 33063	
21. State: FL		26. State: FL		4. Filing Office: FL 33063	
22. City: COCONUT CREEK		27. City: COCONUT CREEK		5. Certificate of Status Fee: \$8.75	
23. County: DADE		28. County: DADE		6. Election Campaign Financing Trust Fund Contribution: \$5.00	
24. Zip: 33063		29. Zip: 33063		8. This corporation is subject to the corporate tax under S. 199 of the Florida Statutes: X Yes ☐ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
FRIEDMAN, MARC 4737 NW 22ND ST COCONUT CREEK FL 33063				81. Name:	
				82. Street Address:	
				83.	
				84. City:	
				85. Zip Code:	
11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is subject to the provisions of the Florida Statutes, Chapter 199, and that the same is duly organized under the laws of the State of Florida. I am a resident of the State of Florida. I am a resident of the State of Florida. I am a resident of the State of Florida.					
12. ADDITIONAL AGENTS OR OFFICERS:					
13. ADDITIONAL AGENTS OR OFFICERS:					
14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law 199 of the 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 serve as evidence of my knowledge of the facts stated herein. I am a resident of the State of Florida. I am a resident of the State of Florida. I am a resident of the State of Florida.					

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIVISION

May 3 1995 305-978-6688