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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000083132 (8)

HJV	MARINE CONSTRUCTION, IN	IC.							
Principal Pi	ace of Business	Mailing Address				1 10011091 (10 1011) 01011 09111 00111 00		1008 HHIO INDA 1881	
4737 NW 22ND ST 4737 NW 22ND ST					ļ				
COCONUT CREEK FL 33063 COCONUT CREEK FL 33063			3063			DO NOT WRITE IN THIS SPACE			
					f	3. Date Incorporated or Qualified	THO OF AGE		
					1	11/15/1994		{	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For	
21		26	<u> </u>			65-0539466		Not Applicable	
_	Suite, Apt. #, etc.				J	5. Certificate of Status Desired		'5 Additional	
22								Required	
 		├ ¬ '	28		- 1	Election Campaign Financing Trust Fund Contribution		00 May Be	
Zip	Country 7 ip Cou			irv		8. This corporation owes or has paid			
24	25	-	30	,		Personal Property Tax due June 3		□ No	
	9. Name and Address of Curren					10. Name and Address of New Reg			
	FRIEDMAN, MARC		8	1 Name	;				
4737 NW 22ND ST				2 Street	Address	dress (P.O. Box Number is Not Acceptable)			
COCONUT CREEK FL 33063			L	<u> </u>		· · · · · · · · · · · · · · · · · · ·	·		
			[€	3				ļ	
			8	4 City			85 Z	Zip Code	
dd Dwymau	the the provisions of Capital COZ OF OF		- 45				FL 85 4	- 12 - 21 - 21	
office o	nt to the provisions of Sections 607.0502 registered agent, or both, in the State	r and 607.1508, Florida Statute of Florida_Such change was a	is, the abo uthorized	ive-named by the cor	a corpora rporation	ation submits this statement for the pu 's board of directors. I hereby accept	rpose or changin the appointment	g its registered	
agent. I	l am familiar with, and accept the obliga	tions of, Section 607.0505, Flo	rida Statut	es.				1	
SIGNATURE	Signature, typed or printed havin of regulated age:	it and title if applicable (NO14	· Registered &	Oont signature	e required w	vhen reinstating)	DATÉ		
12.	OFFICERS AND		13.	igon orginalor	e roquired v	ADDITIONS/CHANGES TO OFFICE		IORS IN 12	
TITLE	DP	DELETE	1.1 1fTL1		T		☐ Chan		
NAME	VOLLMAN, ROBERT J		1.2 NAM	E	{			[]	
STREET ADDRESS	AMAN ANAL STATE AM		1.3 STRE	E1 ADDRESS	}];	
CITY-ST-ZIP	COCONUT CREEK FL 33063	COCONUT CREEK FL 33063		- S1 - ZIP					
TITLE	VST	☐ DELETE	2.1 TITLE				Chang	ge 🔲 Addition (
NAME) VOLLMAN, ROBERT J			E				1	
STREET ADDRESS			2.3 STR	2.3 STREET ADDRESS					
CITY-ST-ZIP	COCONUT CREEK FL 33063		_	-ST-ZIP	ļ				
TITLE	·		3.1 TITLE				L Chang	ge L. Addition	
NAME OTRET LEGERA	.		3.2 NAM		1				
STREET ADDRESS	5		i i	ET ADDRESS]			Į	
CITY-ST-ZIP TITLE		DELETE	4.1 THTLE	- ST - ZIP	 -		Chang	ge Addition	
NAME	}		4. 2 NAN		ł		- Online)	
STREET ADDRESS			1	ET ADDRESS				1	
CITY-ST-ZIP	Ĭ		4.4 CITY		1			ľ	
TITLE	· · · · · · · · · · · · · · · · · · ·		5.1 TITLE		 		Chang	ge Addition	
NAME			5.2 NAM	E					
STREET ADDRESS	s (5.3 STRE	et address	1			}	
CITY-ST-ZIP	<u> </u>		5.4 CITY	-ST-ZIP					
TITLE		DELETE	6.1 TITLE				Chang	ge Addition	
NAME]		6.2 NAM	E .				}	
STREET ADDRESS	s [63 STRE	et address				1	

14. Thereby 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.

J. Vollinger 4/21/94 954-648-7202