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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400086203 (4)

FAIRLINE MARINE, INC.

FILED May 07 1997 8:00am Secretary of State



Principal Piace of Business Mailing Address 201 SE 15 TERR SUITE 210 DEERFIELD BEACH FL 33441 Mailing Address 201 SE 15 TERR SUITE 210 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441							
					 Date Incorporated or Qualified 11/28/1994 	3a. Date of La 04/11/19	
·	ace of Business NE 3rd St.	2a. Mailing Address 26 850 NE	3215	t	4. FEI Number 65-0540264		Applied For Not Applicable
Suite, Apt 22 2 0 3	#, etc.	Suite, Apt. #, etc. 27 203			5. Certificate of Status Desired	1 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	75 Additional e Required
City & State 23 Dani		City & State	FL		Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
24 330	04 25 Broward	^{Zip} 33004	30 By	ousid		Yes No	ler s. 199.032,
	9. Name and Address of Current	Registered Agent			10, Name and Address of New Re	glatered Agent	·····
Worsnop, Kevin 201 S.E. 15th Terr Suite 210 Deerfield Beach Fl 33441				82 Street Address (P.O. Box Number is Not Acceptable) 850 NE 3-3 St.			
UEC	THELD DEACH I E 35441		8	Dut	203	FL 85	Zip Code
11. Pursuant to office or re agent. Lai	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obliga	and 607.1508, Florida Str of Florida. Such change with tions of, Section 607.0505	atutes, the abo as authorized I , Florida Statut	ve-named corp by the corporal es.	poration submits this statement for the pation's board of directors. I hereby acceptions	ourpose of changi ot the appointmen	ng its registered it as registered
	Signature Typed or printed name of registered agen OFFICERS AND			gent signatura requi	red when reinstating)	DATE	7000 1110
12.	P OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Cha	
NAME	Worsnop, Kevin		1.2 NAM			_	
STREET ADDRESS	201 S.E. 15TH TER		1.3 STRE	et address			
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		1.4 CITY	-ST-ZiP		·	·····
TITLE	C DOMAIN A	☐ DELETE	2.1 TITLE)		☐ Cha	nge
NAMÉ TRISÉT ABORDOS	PETERS, BRIAN A CHICHESTER MARINA		2.2 NAM				
STREET ADDRESS CITY ST. ZIP	BIRDHAM CHICHESTER, UK		1	ET ADDRESS '-ST-ZIP			
TITLE	V	☐ DELETE	3.1 TITLE			Cha	nge Addition
NAMÉ	MORGAN, ANTHONY D		3.2 NAM	E			
STREET ADDRESS	CHICHESTER MARINA		3.3 STRE	et adoress			
CITY - ST - ZIP	BIRDHAM CHICHESTER, UK	[7] 55:		-ST-ZIP		77.4	
TITLE		DELETE	4.1 TITLE			L Cha	nge Addition
NAME STREET ADDRESS			4. 2 NAM	- 1			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE			Cha	nge Addition
NAME			5.2 NAM	1			
STREET ADDRESS				ET ADDRESS			
CHY-ST-ZIP			5.4 CITY	·			
TITLE		DELETE	6.1 TITLE			Cha	nge Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STAE	et address	•		
CITY - \$1 - ZIP		·····	6.4 CITY	-ST-ZIP			

14. I do 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 chapter or or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

954-924-0003