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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90195 016 \*\*\*150.00

## DOCUMENT # P9500001353

1. Corporation Name

INTERNA	MIONAL MARINE DIESEL S	PECIALIST, INC.					
Principal Place of Business		Mailing Address		1 Haddad in the add and and	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1714 W. LAS O		1714 W. LAS OLAS BLVD.					
FT. LAUDER()ALE FL 33312 FT. LAUDER		FT. LAUDERDALE FL 33312	AUDERDALE FL 33312		DO NOT WRITE IN 1	TH S SPACE	
					3. Date Incorporated or Qualifed		
					01/04/1995		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Apr	pied For
21		26			65-0551278	Not	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A		
22		27			5. Certificate of classes bearing	Fee Red	quired
City & S at	e	City & State			6. Election Campaign Financing	\$5.00	•
23		28			Trust F and Contribution	Added to	Fees
Zip	Coun:ry	Zip	Countr	У	8. This corporation owes the current year		[]No
24	25		30		Personal Property Tax.  10. Name and Address of New Registe		
	9. Name and Address of Currer	it Registered Agent	8.	Name		To a reguite	
AND	ERSDOTTER-EKBERG , ANNA						
1714 W. LAS OLAS BLVD.			8	Street	Address (P.O. Box Number is Not Acceptable)		
FT. L	AUDERDALE FL 33312		8:	3			<del></del> /
			8-	City		FL 85 Zip C	ode
agent. I a	m familiar with, and accept the obligation of signature, typed or printed name of registered age	tions of, Section 607.0505, Flor	ida Statute	s.	operation's board of cirectors. I hereby accept the a required when reinstating)  ADDITIC NS/CHANGES TO OFFICER	<u>``</u>	
TITLE	P	☐ DELETE	1.1 TITLE		ABBITICAGOTIANOES TO OFFICER	☐ Change	Addition
NAME	EKBERG, ULF		1.2 NAME				
STREET ADDRE 3S	1714 W. LAS OLAS BLVD.			ET ADDRESS			
	FT. LAUDERDALE FL 33312		1.4 CITY-				
CITY-ST-ZIP TITLE			2.1 TITLE	01-4 <u>-11</u>		Change	Addition
NAME			2.2 NAME				
STREET ADDRESS	1714 W. LAS OLAS BLVD.		2.3 STRE	ET ADDRESS	3		
CITY-ST-ZIP			2. 4 CITY	ST-ZIP		<u></u>	
TITLE			31 TITLE			Change	Addition
NAME	EKBERG, LINDA		3.2 NAME				
STREET ADDRESS	1714 W. LAS OLAS BLVD.		3.3 STRE	ET ADDRESS	S		
CITY-ST-ZIP	FT. LAUDERDALE FL 33312		3.4. CITY	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		VP/S/T	Change	Addition
NAME			4. 2 NAM	Ī	ALEXIS C. EKBERG		
STREET ADDRESS			4.3 STRE	ET ADDRESS	1714 W. LAS OLAS BLVD.		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	FT.LAUDERDALE FL 33312		
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRE 3S				ET ADDRESS	5		
CITY-ST-ZIP	·	- Delete	5.4 CITY- 6.1 TITLE	ST-ZIP		Change	Addition
TITLE		☐ DELETÉ	6.1 NAME				
NAME				ET ADDRESS			
STREET ADDRE 3S			0.3 3 IKE	_ i ADUNE33	'		

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify fir 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 corpora ion 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, with all other like empowered.

SIGNATURE:

NA Androndoller-Puberg VI/7/S. April 23-99 954-764-2806

CR2E034 (11/98)