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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000002488 (1)

R & M MARINE SURVEYORS, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			5115 11611 61631 16161 1611 1561
1114 SYLVAN DR 1114 SYLVAN DR					
SARASOTA FL 34234 SARASOTA FL 34234				DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified	
				01/04/1995	
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 AS	ABOVE	26 AS ABO	VE	65-0562700	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	Ð	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23 Zip	Country	28 Zip	Country		Added to Fees
24	25 USA		30 SARAS	 This corporation owes or has paid the c Personal Property Tax due June 30. 	Yes No
27	9. Name and Address of Currer		30 71 124 12	10. Name and Address of New Registere	
LEVITT, SANDY 81 Name					
1 AAAA SHAQIMA BILAD				dress (P.O. Box Number is Not Acceptable)	
SUITE 203			OZ Sileer Add	diess (1.0. box Number to Not Acceptable)	
SARA S OTA FL 34237			83		
			84 City		85 Zip Code
				F	
11. Pursuant to the provisions of Sections 607,050? and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the purpose of ch					
11. Pursuant to the provisions of Sections 607.0502 and 607.15002. Florida Statutes, the above-named corporation submits this statement for the purpose of charging its registered office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lapper amiliar with and recept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typod or agrice's narrie of registered agent and title if applicable (NOTE: Registered Agent's gnature required when reinstating) DATE					
		O DIRECTORS (NOTE	Registered Agent a gnature requ	DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12.	D	DELETE	1.1 TITLE	ADDITIONS/OFFICIALIZED TO OFFICE HEAD	Change Addition
NAME	BOWEN, ROY A		1.2 NAME		
STREET ADDRESS	1114 SYLVAN DR		1.3 STREET ADDRESS		
CITY+ST-ZIP	SARASOTA FL 34234		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITUE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	,		4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE			5.1 TITLE		
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADORESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		CJ VICEIR	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
1			6.4 CITY - ST - ZIP		
CITY-ST-ZIP	L		0.7 0111 01-28	Carlos Manager Library	

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 13 if changed, or on an attachment with an address.

00/04/952-1/10