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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000005435 (9)

**DOCUMENT #** 

J & R MARINE SERVICES, INC.

Principal Place of Business

2785 SCHOOL DRIVE N.E.

Mailing Address

2785 SCHOOL DRIVE N.E.



PALM BAT	rt. 32905		PALM BAT FL 3290	•			
							Date Incorporated or Qualified     O1/20/1995     A. Date of Last Report
2. Principal Ptace of Business 2a.			Mailing Address				4. FEI Number Applied For
26							59-3266153 Not Applica
Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees
Ζφ 24	Country 25	29	Zip	30 Cou	ntry		<ol> <li>This corporation has liability for intangible tax under s 199.032,</li> <li>Florida Statutes ☐ Yes X No</li> </ol>
	<ol><li>Name and Address of Cur</li></ol>	rent Regist	tered Agent				10. Name and Address of New Registered Agent
	VILLE, JEFFRY D				81 82	Name Street A	Address (P.O. Box Number is Not Acceptable)
	CHOOL DRIVE N.E.				83		
PALM E	BAY FL 32905				63		
					84	City	85 Zip Code
11 Pursuant to	o the provisions of Sections 607 Of	102 and 603	7 1509 Florido Statut	too the obe	l	L	orporation submits this statement for the purpose of changing its registered o
SIGNATURE S	Suprature, typed or one teld name, of respisares, a OF FICERS A			OTE Hagabrad	V <sup>Des</sup>	! Signature ro	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			DELETE		1 1 TITLE		P/D Change X Addition
NAME				1.2 NA	ME		JEFFRY D. ROBITAILLE
STREET ADDRESS				1.3 ST	REE1	ADDRESS	2785 SCHOOL DRIVE N.E.
CITY - ST - ZIP				1 4 Cı	17-5	T - 21P	PALM BAY, FL 32905
TITLE	☐ DELETE			2 1 T-TLF		☐ Change ☐ Addition	
NAME				2 2 N/			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP TITLE			DELETE	2 4 CT	_	F - ZiP	☐ Change ☐ Additio
NAME			Detele	3 2 NA			
STREET ADDRESS						ADDRESS	
CITY+ST+ZiP				3 4 CI			
TITLE			☐ DELETE	4 1 31			Change Add tio
NAME				4.2 NA	ME	Ì	
STREET ADDRESS				4351	REET	ADORESS	
CITY-SI-ZIF				4 4 CI		T - ZIP	
TITLE			DELETE	5 1 Ti			Change Add tio
NAME CLOSEL ADDRESS				5 2 NA			
STREET ADDRESS						ADORESS	
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NAME			occen	62 NA			
STREET ADDRESS						ADDRESS	
CITY - ST-ZIP				64 CI			
14. I do hereby certify that I oath; that I	the information indicated on this a	nnual report rporation or	t or supplemental and the receiver or truste	nished and onual report is se empower	does s tru	s not qua	alfy for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further ocurate and that my signature shall have the same legal effect as if made unde te this report as required by Chapter 607, Florida Statutes; and that my name