

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000009083 (3)

1. Corporation Name

MARITIME WARRANTIES USA, INC.



Principal Place of Business

200 EAST LAS OLAS BLVD., SUITE 1800  
FT. LAUDERDALE FL 33301

Mailing Address

200 EAST LAS OLAS BLVD., SUITE 1800  
FT. LAUDERDALE FL 33301

3. Date Incorporated or Qualified  
01/30/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

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26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

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25

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30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRINKLEY, W. MICHAEL  
200 EAST LAS OLAS BLVD., SUITE 1800  
FT. LAUDERDALE FL 33301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

SQUIBB, MARY

200 EAST LAS OLAS BLVD., SUITE 1800  
FT. LAUDERDALE FL 33301

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

FACKRELL, ROBERT

200 EAST LAS OLAS BLVD., SUITE 1800  
FT. LAUDERDALE FL 33301

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert W. Fackrell

10 February 1996

Date

Daytime Phone #

(954)  
522-2200

CR2E034 (12/95)