## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P95000017688 (9)

MARITIME ARTIFACTS CORP.

Principal Place of Business

C/O DONALD E. WHITE 42 WINDSOR LANE

Mailing Address

C/O DONALD E. WHITE

P.O. BOX 31163

**FILED** 

Sep 09 1998 8:00am

Secretary of State

PALM BEACH GARDENS FL 33418		PALM BEACH GARDENS FL 33420			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
C/6 DAVID FOSTER  2. Principal Place of Business		C/6 JIM DOHERTY			03/03/1995	
2. Principal P	lace of Business	2a. Mailing Address		_	4. FEI Number	Applied For
	SUN FISH LA	26 1695 LAKE C	OOK (	ζØ.	65-0560665	Not Applicable
Suite, Apt. #, etc.					5, Certificate of Status Desired	\$8.75 Additional
27 # 328					J. 251300000 51 510100 255000	Fee Required
City & State City & State			AU TI		6. Election Campaign Financing	\$5.00 May Be
23 JUP	IIEK FA	28 HICHLAND PAI	$KK_{f}H$		Trust Fund Contribution	Added to Fees
⊸ <sup>Zip</sup> っっっ	Country 1	- Zip / /2722 K	Country	c 0	8. This corporation owes or has paid the	
24 22	7 1 25 4517	29 60053	0 4	2.77	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current I	Registered Agent	81	Nome	10. Name and Address of New Register	ed Agent
IGOE, JOHN G				81 Name		
C/O EDWARDS & ANGELL			82	Street Ac	idress (P.O. Box Number is Not Acceptable)	
250 ROYAL PALM WAY						
PALM BEACH FL 33480			83			
			84	City		. 85 Zip Code
				,	F	
11. Pursuant	t to the provisions of sections 607.0502 a	and 607.1508, Florida Statutes,	the above	named cor	poration submits this statement for the purpose of ation's board of directors. I hereby accept the ap	changing Its registered
οπice of agent. I a	regist <b>ere</b> d agent, or both, in the State of am fa <b>mi</b> liar with, and accept the obligati	ons of, section 607.0505, Florid	da Statutes	uie corpor 3.	ation's board of directors, I neterby accept the ap	politurient as registered
SIGNATURE	, ,					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature re						
12.	OFFICERS AND	DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS	
THILE	PD	DELETE	1.1 TITLE			Change Addition
NAME	TALKS, HOWARD D		1.2 NAME			
STREET ADDRESS	16 LITTLE POND RD C		1.3 STREET		249 TRADEWIND RD.	
CITY-ST-ZIP	MANALAPAN FL 33462		1.4 CITY-ST	-ZIP	PALM BEACH, FL 33	480
TITLE	D	DELETE	2.1 TITLE			Change Addition
NAME	MORRIS, DOUGLAS P		2.2 NAME			<del>-</del>
STREET ADDRESS	515 RED CYPRESS		2.3 STREET	ADDRESS		<u>'</u>
CITY-ST-ZIP	GARY IL 60013		2.4 CITY-ST	-21P	CARY, IL 60013	
TITLE	DST	DELETE	3.1 TITLE			Change Addition
NAME	DOHERTY, JAMES		3.2 NAME			crosses radout
STREET ADDRESS	1695 LAKE COOK RD. #328		3.3 STREET	ADDRESS		
CITY-ST-ZIP	HIGHLAND PARK IL 60035		3.4 CITY-ST			
TITLE	D	DELETE	4.1 TITLE			Change Addition
NAME	JOHNSON, BRUCE	LI DELETE	4.2 NAME			Change [] Madiabit
STREET ADDRESS	2200 N. POLASKI RD.		4.3 STREET	ADDRESS		
CITY-ST-ZIP	CHICAGO IL 60639		4.4 CITY-ST	1		
TITLE	D D	DELETE	5.1 TITLE	£II		Change Addition
NAME	PATIENCE, JOHN	[] DETELE	5.2 NAME			Change [ ] Addition
	29 INDIA HILL ROAD		5.3 STREET	Annocco	29 INDIAN HILL RD.	
STREET ADDRESS	WININETKA IL 60093				<del></del>	
CITY-ST-ZIP	141141C11/V IT 00032	Посет	5.4 CITY-ST 6.1 TITLE	-ZIP		
TITLE		☐ DELETE				Change Addition
NAME			6.2 NAME			
STREET ADDRESS	•		6.3 STREET	1		
0171/07 7/0	i		0.4.01704.07	- aun 1		

14. I 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 changed, or on an attachment with an address. 9 8 (847) 498-7786