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 # 1. Corporation Name P95000066346 (4)

ACCON MARINE INC.

FILED Mar 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1780 BRAXTON BRAGG LA 1780 BRAXTON BRAGG LA **CLEARWATER FL 34625** CLEARWATER FL 34625 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1995 4. FEI Number 2, Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0607471 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CZIPRI. BERND 1780 BRAXTON BRAGG LA 82 Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34625** В3 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Ď DELETE 1.1 TITLE Change Addition TITLE NAME CZIPRI, BERND 1.2 NAME 2E034 1780 BRAXTON BRAGG LA STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34625** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE CZIPRI, JOHN **2.2 NAME** 1780 BRAXTON BRAGG LA STREET ADDRESS 2.3 STREET ADDRESS CLEARWATER FL 34625 2 4 CITY-ST-7/P CITY-ST-ZIP ■ DELETE Change Addition T/T) F 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE Change TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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.

3.6.98

83/(1), 9101