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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000067644 (1)

FI.V. MARINE (USA) INC.

Principal Place of Business Mailing Address 99098 OVERSEAS HWY. 7000 W PALMETTO PARK RD. KEY LARGO FL 33037-2452 SUITE 400 BOCA RAION FL 33433 3a. Date of Last Report 3. Date Incorporated or Qualified 08/31/1995 08/05/1996 2a, Mailing Address 4. FEI Number Applied For 65-0606896 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 Cily & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THOMES, TIMOTHY N 99198 OVERSEAS HWY. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 8 83 KEY LARGO FL 33037 64 Zip Code City 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and bite if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE THE BOETTCHER, PETER 1.2 NAME NAME 126 CARIBBEAN DR. 1.3 STREET ADDRESS STREET ADDRESS KEY LARGO FL 1.4 CITY - ST - ZIP CITY - ST - ZIF DELETE ☐ Change Addition 2.1 TITLE TILLE JOHNSON, CHRISTY G NAME 2.2 NAME 99096 OVERSEAS HWY. 23 STREET ADDRESS STREET ADDRESS KEY LARGO FL 2 4 CITY-ST-ZIP CITY - ST - Z-P Change DELETE 31 TITLE Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CHY-S1-ZIP Change DELFTE Addition 4.1 TITLE THE 4. 2 NAMÉ NAME 4.3 STREET ADDRESS STREET ADDRESS CHY-ST-7IP 4.4 CHY-\$1-ZiP DELETE Change Addition THEF 5.1 THLE 5.2 NAME NAM: 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - S1 - ZIF Change ■ Addition DELETE TITLE 6.1 TITLE

62 NAME

63 STREET ADDRESS 64 CITY-ST-ZIP 14. I do 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 and cated 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

SIGNATURE:

appears in Block 12 or Blo

NAME

STREET ADORESS

an attachment with an address

Date

Daytime Phone #

FILED

May 08 1997 8:00am

Secretary of State