FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90074 049 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MEN # P95000 ARINE CONSTRUCTION INC					
Principal Place	e of Business	Mailing Address				
Principal Flace of Business 5000 A. GULF BREEZE PARKWAY GULF BREEZE FL 32561		P.O. BOX 6077 GULF BREEZE FL 3256	i 1			DO NOT WRITE IN THIS SPACE
		U\$				3. Date Incorporated or Qualifed
						12/19/1995
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21 1208	Via De Luna	26				65-0632490 No: Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
		27				5. Certificate of Status Desired Fee Required
City & Stat	3	City & State				6. Electic n Campaign Financing \$5.00 May Be
	icola Beach	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		ountry		8. This corporation owes the current year Intangible Personal Property Tax.
24) <u>3236</u>	9. Name and Address of Currer	29 Pagistared Agent	30	_		Personal Property Tax. Yes No. 10. Name and Address of New Registered Agent
	3. Name and Aut less of Curren	ii itegistorea Agent		81	Name	
LAKE	E, ERIC					10 C D North in North Association
5000	A GULF BREEZE PARKWAY		82 Street Act			at Address (P.O. Box Number is Not Acceptable)
GULI	F BREEZE FL 32561			83		
\				84	City	85 Zip Code
					City	FL <u> </u>
office or r	registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed haine of registered age	of Florida. Such change watrons of, Section 607.0505	as ₃uthoriz , Florida St	zed by t tatutes.	he corp	d ccrporation submits this statement for the purpose of changing its registered portition's board of directors. I hereby accept the appointment as registered erequired when reinstating) DATE
12.	•	ND DIRECTORS	<u>-</u>	3.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELET	E 1.1	1 TITLE		Change ☐ Addition
NAME	LAKE, ERIC		1.2	1.2 NAME		2.15 7.1.20
STREET ADDRE 3S	5000 A GULF BREEZE WAY		1.3	1.3 STREET ADDRESS		s 1208 Via De Lona
CITY-ST-ZIP	GULF BREEZE FL			14 CITY-ST-ZIP		s 1208 Via De Luna fensacola Beach, FL 3250!
TITLE		☐ DELET		1 TITLE		Change Addition
NAME				2 NAME		
STREET ADDRESS			1	3 STREET		s
CITY-ST-ZIP		DELET		2.4 CITY-ST-ZIP 31 TITLE		☐ Change ☐ Addition
TITLE		□ here i	1	2 NAME		
NAME				3 STREET	AUUBESS	s
STREET ADDRESS			1	4. CITY-S1		°
CITY-ST-ZIP TITLE	 	☐ D£LE₹		1 TITLE	1-21-	☐ Change ☐ Addition
NAME			4.	2 NAME		
STREET ADDRESS					ADDRESS	s
CITY-ST-ZIP			1	4 CITY-ST		
TITLE		☐ DELET		1 TITLE		Change Addition
NAME			5.3	2 NAME		
STREET ADDRESS			5.3	3 STREET	ADDRESS	s
CITY-ST-ZIP				4 CITY-ST	-ZIP	
TITLE		☐ DELET	- 1	1 TITLE		☐ Change ☐ Addition
NAME)		6.2	2 NAME		

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 a noual 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, with all other like empowered.

64 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (11/98)