SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT FLORIDA DEPARTMENT\OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS AUG -5 AM 9: 15 DOCUMENT # P9600000947 (7) SECRETARY OF STATE TALLAHASSEE FI MARINA TECHNOLOGY, INC. Principal Place of Business Mailing Address 1106 WEST ALICIA AVENUE 1106 WEST ALICIA AVENUE TAMPA FL 33604 TAMPA FL 33604 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 01/04/1996 2. Principal Place of Business 2a. Mailing Address FEL Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State Cily & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Country Zip Zip 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 84 City 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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSTD DELETE Change Addition TITLE 1.1 TITLE 900002261699---08/08/97--01084--022 ****165.00 ****165.0 ZDOBINSKY, FRANK NAME 1.2 NAME 1106 WEST ALICIA AVENUE STREET ADDRESS 1.3 STREET ADDRESS ****165.00 **TAMPA FL 33604** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 2.1 TITLE Change TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP DELETE 4.1 TITLE Change ☐ Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF ○ ☐ Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- 7IP 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 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 eath, 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 of changed, or in an attachment with an address.

TO DEPARTMENT OF STATE, DIVISION OF CORPORATIONS:

AS PER OUR CONVERSATION ON THE PHONE, I AM
WRITING THIS NOTE TO CANCEL THE PENALTY ADDED
TO MY CORPORATION FILING FEES, I DIDN'T RECEIVE
THE FIRST NOTICE AND I SHOULDN'T BE PENALIZED FOR
THAT, PLEASE CHECK YOUR RECORD.

ATTACHED IS MY CHECK FOR \$ 165.00 , PLEASE CORRECT YOUR RECORD.

THANK YOU FOR YOUR COOPERATION!! SINCERELY,

FRANK ZDOBINSKY, PSTD