

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 06, 2003 8:00 am**  
**Secretary of State**

02-06-2003 90111 025 \*\*\*150.00

DOCUMENT # P96000010247

1. Entity Name  
TRIPLE M MARINE CORP.



Principal Place of Business  
4400 GRANT STREET  
HOLLYWOOD FL 33021

Mailing Address  
4400 GRANT ST  
HOLLYWOOD FL 33021

2. Principal Place of Business

5000 Taylor Street

3. Mailing Address

5000 Taylor Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hollywood, FL

City & State

Hollywood, FL

Zip

33021

Country

Zip

33021

Country

4. FEI Number

65-0637441

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

RODRIGUE-MOLINA, LUIS M  
4400 GRANT STREET  
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name Rodriguez-Molina, Luis Manuel  
Street Address (P.O. Box Number is Not Acceptable)  
5000 Taylor Street  
City Hollywood FL Zip Code 33021

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Luis Manuel Rodriguez-Molina* 2-1-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.



\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME RODRIGUEZ-MOLINA, LUIS MANUEL  
STREET ADDRESS 4400 GRANT STREET  
CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete

TITLE D  
NAME MARRERO, OSVALDO  
STREET ADDRESS 6321 LAKE GENEVA ROAD  
CITY-ST-ZIP HIALEAH FL 33014 ☐ Delete

TITLE D  
NAME MARRERO, LYSANDER  
STREET ADDRESS 6321 LAKE GENEVA ROAD  
CITY-ST-ZIP HIALEAH FL 33014 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director  
NAME Rodriguez-Molina, Luis Manuel  
STREET ADDRESS 5000 Taylor Street  
CITY-ST-ZIP Hollywood, FL 33021 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Luis Manuel Rodriguez-Molina* 2-1-03 954-964-0912

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)