

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Martham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000014334 (2)**

1. Corporation Name

**MARINE BOATING USA, INC.**

Principal Place of Business

**% 1222 NE 4TH AVE  
FT LAUDERDALE FL 33304  
US**

Mailing Address

**%1222 NE 4TH AVE  
FT LAUDERDALE FL 33304  
US**

2. Principal Place of Business

**21 Suite, Apt. #, etc.**

2a. Mailing Address

**26 Suite, Apt. #, etc.**

**22 City & State**

27 City & State

**23 Zip**

28 Zip

**24 Country**

29 Country

**30**

9. Name and Address of Current Registered Agent

**BERUBE, CLAIRE  
2901 NW 48TH AVE  
268  
FT LAUDERDALE FL 33313**

**81** Name

**Claire Berube**

**82** Street Address (P.O. Box Number is Not Acceptable)

**448 Redwood Road**

**83**

**84** City

**Venice**

**FL** **85** Zip Code  
**34293**

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 familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*(Signature)* **Claire Berube**

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

(NOTE: Registered Agent signature required when reinstating)

*3/21/98*

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

<b>TITLE</b>	<b>P</b>	<input type="checkbox"/> <b>DELETE</b>	<b>1.1 TITLE</b>	<b>P</b>	<input checked="" type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>
<b>NAME</b>	<b>BERUBE, CLAIRE</b>		<b>1.2 NAME</b>	<b>Claire Berube</b>	
<b>STREET ADDRESS</b>	<b>2901 N.W. 48TH AVE, APT. 268</b>		<b>1.3 STREET ADDRESS</b>	<b>448 Redwood Rd</b>	
<b>CITY-ST-ZIP</b>	<b>FT. LAUDERDALE FL 33313</b>		<b>1.4 CITY-ST-ZIP</b>	<b>Venice, Florida 34293</b>	
<b>TITLE</b>		<input type="checkbox"/> <b>DELETE</b>	<b>2.1 TITLE</b>		<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>
<b>NAME</b>			<b>2.2 NAME</b>		
<b>STREET ADDRESS</b>			<b>2.3 STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>2.4 CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> <b>DELETE</b>	<b>3.1 TITLE</b>		<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>
<b>NAME</b>			<b>3.2 NAME</b>		
<b>STREET ADDRESS</b>			<b>3.3 STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>3.4 CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> <b>DELETE</b>	<b>4.1 TITLE</b>		<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>
<b>NAME</b>			<b>4.2 NAME</b>		
<b>STREET ADDRESS</b>			<b>4.3 STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>4.4 CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> <b>DELETE</b>	<b>5.1 TITLE</b>		<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>
<b>NAME</b>			<b>5.2 NAME</b>		
<b>STREET ADDRESS</b>			<b>5.3 STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>5.4 CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> <b>DELETE</b>	<b>6.1 TITLE</b>		<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>
<b>NAME</b>			<b>6.2 NAME</b>		
<b>STREET ADDRESS</b>			<b>6.3 STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>6.4 CITY-ST-ZIP</b>		

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.

SIGNATURE

*(Signature)* **Claire Berube**

*3/20/98*

**941-408-0059**

FILED  
Mar 26 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**02/12/1996**

4. FEI Number  
**65-0643130**  Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

CR2E034 (10/97)