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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000021668 (4) MCLAUGHLIN MARINE ENTERPRISES, INC. Principal Place of Business Mailing Address C/O-BILL SHORT 21525 BLAKELY SHORES DR. CHARLOTTE NC 28031 608 S.E. 6TH STREET DO NOT WRITE IN THIS SPACE FT. LAUDERBALE FL 33301 3. Date Incorporated or Qualified 03/08/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 26 3626 INDIAN RIVER DR. 65-0647203 21 3626 INDIAN RIVER DR. Not Applicable Suite, Apt #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing VERO BEACH VERO BEAC Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 32963 USA Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent REUTHER, MARK S 2540 N.E. 199TH ST. 82 N. MIAMI BEACH FL 33180 83 Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporagent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE MARGARET S. MCLAUGHLIN, DIRECTOR OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELFTE Change 1.1 TITLE TITLE MCLAUGHLIN, MARGARET S 1.2 NAME NAME 3626 INDIAN RIVER DRIVE, EAST 609 S.E. 6TH ST. GUITE 7 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33301 CITY - ST - ZIP 1.4 CITY - ST- ZIP DELETE TITLE 21 TITLE MCLAUGHLIN, MICHAEL 22 NAME NAME 3626 INDIAN RIVER DRIVE, EAST 608 S.E. 6TH ST. SUITE 7 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 93301 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE 3 1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CITY- \$1 - ZIP Change DELETE Addition 61 TITLE TITLE

14. Thereby 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 indicated on this annual report or supplemental annual report is true and accurate and officer or director of the corporation or the receiver or trustee empowered to execute the Block 12 or Block 13 if changed or may attachment within address.

SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS CITY-ST-ZIP

561/234-6957

**FILED** 

Mar 11 1998 8:00am