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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000042943**1. Corporation Name

DIVERSE MARINE SERVICES, INC.

				•							
Principal Place of Business				Mailing Address					IL BRILL BI	310 11010 101	11 81888 1111 1841
1000 011 10110 1111111011				O SW 43RD AVENUE LAUDERDALE FL 33314				DO NOT WRITE IN	I THIC (	SDACE	
	•							3. Date Incorporated or Qualifed	11113	- AOE	
	•							05/13/1996			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number			Applied For
¬ · · · · ·				16				65-0665401		I	Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.							Additional
22				27				5. Certifcate of Status Desired			Required
City & State				City & State				6. Election Campaign Financing		\$5.00	May Be
23			28	28				Trust Fund Contribution			d to Fees
Zip	<del></del>	Country	<u> </u>	Zip	Country	,		8. This corporation owes the current y	ear Inta	ngible	
24	25		29	3	0			Personal Property Tax.		Pes	□No
	9. Name and	Address of Current	t Regis	tered Agent		_		10. Name and Address of New Regis	tered A	gent	
					81	1	Name	•			
PENNINGTON, DANIEL					82	╁	Street Addres	ss (P.O. Box Number is Not Acceptable)			
4660 SW 43RD AVENUE					"		Oll Oct / Iddi Ol				
FT. LAUDERDALE FL 33314					83			,			
	2				84	╀	City			85 Zip	Code
	•				04		City		FL	65 24	, code
office or r	egistered agent,	or both, in the State of	of Floric	07.1508, Florida Statutes la. Such change was aut Section 607.0505, Florid	honzed by	th	named corpor ne corporation	ration submits this statement for the purp's board of directors. I hereby accept the	ose of o	hanging it tment as r	ts registered registered
SIGNATURE	-	· ·						D.	ATE		
12.	Signature, typed or pri	inted name of registered agent		<del> </del>	13.	nt s	signature required v	ADDITIONS/CHANGES TO OFFICE		DIRECT	ORS IN 12
TITLE	P	OFFICERS AN	שאוט ט	DELETE	1.1 TITLE			ADDITIONS OF AN IOCO TO STEED	7 11 11	Change	
	l •	N DANIEI			1.2 NAME					_ '	_
NAME	ACCO CALL LODD ALITABLE						STREET ADDRESS				
ET LAUDEDDALE EL 00044											
CITY-ST-ZIP	ST CAUDENI	DALE FL 33314		☐ DELETE	1.4 CITY-S 2.1 TITLE	1-4	ZIP.			☐ Change	e
TITLE	PENNINGTO	N DODY D			2.2 NAME						
NAME	4660 SW 43				2.3 STREE	T A1	DODECC		•		
STREET ADDRESS		DALE-FL-33314						<u>.</u>		+	
CITY-ST-ZIP	FI. CAUDEN	UNLE-FL 333 14		☐ DELETE	. 2, 4 CITY-5 3.1 TITLE	31+	-217			Change	Addition
					3.2 NAME					_ `	_
NAME					3.3 STREE	T A	INDEECE				
STREET ADDRESS							i				
CITY-ST-ZIP	<del> </del>			☐ DELETE	3.4. CITY-1	51-	-217			Change	e Addition
TITLE				CI DELETE	4. 2 NAME						
NAME							ODGEGG				ļ
STREET ADDRESS					4.3 STREE						
CITY-ST-ZIP		<del>-</del>		☐ DÉLETE	4,4 CITY-S	1-2	<u> </u>			Change	e Addition
TITLE		•		□ DELETE	5.1 TITLE 5.2 NAME			-			,
NAME.	ļ	·			5.3 STREE	TA	ADORESS				
STREET ADDRESS					5.4 CITY-9						
CITY-ST-ZIP	5000		•	DELETE	61 TITLE	21-4				Change	e Addition

6.4 CITY-ST-ZIP CITY-ST-ZiP: 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE

NAME

STREET ADDRESS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90037 016 \*\*\*150.00