

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000045633

1. Entity Name
SARAMANA MARINE, INC.



Principal Place of Business
**6015 28TH ST. E
A
BRADENTON, FL 34203 US**

Mailing Address
**POB 905
TALLEVAST, FL 34270 US**



04232004 No Chg-P CR2E034 (10/03)

4. File Number 65-0671865	Added For Not Added
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WOLF, JACK
6015 28TH ST. E.
STE A
BRADENTON, FL 34203**

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 _____

Signature of individual or registered agent or both

NOTE: Registered agents are required to file an annual report.

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DVP
NAME	WOLF, JACK
STREET ADDRESS	6015 A 28TH ST. E.
CITY/STATE/ZIP	BRADENTON, FL 34203
TITLE	PTS
NAME	WOLF, ANNETTE
STREET ADDRESS	6015 A 28TH ST. E.
CITY/STATE/ZIP	BRADENTON, FL 34203
TITLE	
NAME	
STREET ADDRESS	
CITY/STATE/ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY/STATE/ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY/STATE/ZIP	

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04/26/04-80149-015 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(9)(a), 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 by an officer or director of the corporation or the record or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 10 or Book 11 changed, or on an attachment with an address, with a date like empowered.

SIGNATURE:

Annette Wolf *Annette Wolf*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/04 (94) 757-2511