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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P96000046283 (3

1. Corporation Name  MARINE UNLIMITED	P96000046283 (3 SERVICE, INC.	<b>3)</b>		
Principal Place of Business	Mailing Address			ISTO MENDEM METERA DEMONITURA DE LA CONTROL
232 BASIN DRIVE 232 BASIN DR LAUDERDALE BY THE SEA FL 33308 LAUDERDALE		IE SEA FL 33308-5002		
			05/31/1996	Ba. Date of Last Report
Principal Place of Business     The Principal Place of Business     The Principal Place of Business	2a. Mailing Address 25		4. FEI Number 0009215	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc	·.	5. Certificate of Status Desired	\$9.75 Additional
Cty & State	City & State		6. Election Campaign Financing	_ \$5.00 May Be
23	28			Added to Fees
` k	Country Zip	Country	8. This corporation has liability for inta	
24 25 25 9. Name and		30	Florida Statutes V Y  10. Name and Address of New Regis	
	ATIONS ENTERPRISES, INC.	81 Name Qu	2611 Schintz	w
#211		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
PALM BEACH GAR	RDENS FL 33418	83 LAW	fundale by the Sea,	FL 30 TODAY
			· •	FL 33300
Pursuant to the provisions office or registered agent, agent. I am familiar with, at SIGNATURE.	ol Sections 607.0502 and 507.1508, Florida S of both arrive State of Florida Such change of pt accept the obligations of, Section 607.050	statutes, the above-named corp was authorized by the corporat 5, Florida Statutes.	poration submits this statement for the purplion's board of directors, I hereby accept the	ne appointment as registered
Signature, typed or prin	nted name of registered agent and title if applicable	(NOTE: Registered Agent signature requir		DATE
12.	OFFICERS AND DIRECTORS  DELETI	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12  Change Addition
NAME SCHINTZIUS		E 1.1 TITLE 1.2 NAME		Circumpe Circumon
STREET ADDRESS % 232 BASIN DRIVE		1.3 STREET ADDRESS		
	E BY THE SEA FL 33308	1.4 CITY-ST-ZIP		
TOLE	DELETI	E 2.1 TITLE		Change Addition
NAM:		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CHY-ST-ZIP	T DELETE	2 4 CITY-ST-ZIP		Change Addition
TIFLE	☐ DELETI	E 3.1 TITLE		Change Addition
STREEL ADDRESS		3.3 STREET ADDRESS	•	
CITY-ST-ZIP		3.4. CATY+ST-ZAP		
TITLE	DELETI			Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
City-S1-ZiP		4.4 CiTY-ST-ZiP		
TITLE	L. DELETI			Change Addition
NAME		5.2 NAME		
STREET ACOMESS		5.3 STREET ADDRESS		
CHY - ST - 7F1 TITLE	☐ DELET	5 4 CITY-ST-ZIP E 6.1 TITLE		Change Addition
NAME	DULIN	6.2 NAME		— Sumillo — Locatio()
STREET ADDRESS		6.3 STREET ADDRESS		
City-St-Zip		64 CITY-ST-ZIP		
14. I do hereby certify that the	information supplied with this filing does not	qualify for the exemption stated	d in Section 119.07(3)(i), Florida Statutes. I	further certify that the
information indicated on the fam an officer or director of appears in Block 12 or Blo	is annual report of supplemental annual report of the corporation of the receiver or trustee er ock 13 if changed, or on an articument with a	irt is true and accurate and that progress to execute this repor neadress.	rmy signature snall have the same legal e it as required by Chapter 607, Florida Stat	rrect as it made under oath; that utes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone

**FILED** 

May 02 1997 8:00am

Secretary of State

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