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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000067402 (3)

PASSAGE MARINE, INC.

FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 3850 NW BOCA RATON BLVD #10 P.O. BOX 273294 **BOCA RATON FL 33431 BOCA RATON FL 33427-3294** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For 21 26 65-0684851 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 25 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BELCHER, GERALD F 6363 N.W. 6TH WAY Street Address (P.O. Box Number is Not Acceptable)
3300 N.E. 67h DRIVE 82 SUTIE 210 83 FT. LAUDERDALE FL 33309 84 City 85 Zip Code 3343 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. GERAUD BELCHER equired when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11 TITLE BELCHER, GERALD F P.O. BOX 273294 NA STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33427-3294** 1,4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE **BUTLER, KIT** NAME 2.2 NAME P.O. BOX 273294 NA 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33427-3294** CITY-ST-ZIP 2 4 CITY - S1 - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition 61 THLE Change TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-\$T-ZIP 6.4 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 turther 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.

MATURE ST. 1 ATRILL GEONDE BELLUGO 2-120 511-218-279