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 # P96000072708 (6)

MARINE NETWORK, INC.

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 3350 NW 21 ST 3350 NW 21 ST **MAMI FL 33142** MIAMI FL 33142 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 09/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For ARINE 65-0710051 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing $\sqsubset I$ MIAM 23 Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 3 (42 U.S.A. Personal Property Tax due June 30. 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SOTO, VICENTE 411 LUENGA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33146 50 N.W. 21 84 Zip Code 33142 City 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. SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. OF ICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ሽ TITLE DELETE 1 1 THTLE Change ■ Addition Resident SOTO, VICENTE NAME 12 NAME soto, Vicente 3350 N W 21 5t 411 LUENGA AVENUE STREET ADDRESS 1.3 STREET ADDRESS **CORAL GABLES FL 33146** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change TITLE 2.1 TITLE Addition EZCURRA, DANIEL C NAME 2.2 NAME 411 LUENGA AVENUE STREET ADDRESS 2.3 STREET ADDRESS CORAL GABLES FL 33146 CITY-ST-ZIP 2. 4 CITY - ST - 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 Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 suppliemental 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 frustoe 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.

SIGNATURE:

4.29-98 (305)634-3700