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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999	
DOCUMENT #	P96000075142

1. Corporation Name DARREL'S MOBILE MARINE, INC.		
Principal Place of Business 1628 STANFORO LANE SARASOTA FL 34231	Mailing Address 1628 STANFORD LANE SARASOTA FL 34231	

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90054 023 ***150.00

DO NOT WRITE IN THIS SPACE

Applied For

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3. Date Incorporated or Qualifed

09/09/1996

						4. FEI Number Not Applicable
		2a. Mailing Addre	955		1	65-0694723 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Status Desired Fee Required Fee Required Added to Fees Fund Contribution
	Rusiness	2a. Mailing Addit		_		Group Desired Fee Required
2. Principal Place of	- Basilisos	26	etc		<i>\</i>	5. Certificate of Status Desired Fee Required
21		Suite, Apt. #	, 610.			5. Certificate of the state of
Suite, Apt. #, etc		27				6. Election Campaign Financing Added to Fees Trust Fund Contribution Added to Fees
22		City & State				Trust Fund Commodes.
City & State		28		untry		Trust Fund Contribution 8. This corporation owes the current year Intangible 9. This corporation owes the current year Intangible
├ ──1		Zip	$\overline{}$	J. 100		Personal Property Tax.
Zip	Country	29	30			Personal Property Tax. 10. Name and Address of New Registered Agent
	25 Name and Address of Curren	Penistered Agent	·	81	Name	
24	Name and Address of Curren	[itegio		10,1		ess (P.O. Box Number is Not Acceptable)
				82	Street Addre	ess (P.O. Box Number 1
DAVIS.	WILLIAM D			1 (
1628 S	TANFORD LANE		_	83		85 Zip Code
	AT					FL "
SAHAS	OIKILOIGO			84	City	tor the purpose of changing its registered
}					o comed COU	poration submits this statement to accept the appointment as registered
\ \		92 and 607 1508, F	iorida Statutes, th	e abov	the corporat	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered DATE DA
	the provisions of Sections 607.05 istered agent, or both, in the Statistered agent, and accept the oblig familiar with, and accept the	e of Florida, Such cl	hange was autilor	Statutes	ş.	
11. Pursuant to	istered agent, or both, in the State	gations of, Section 6	07.00001110000			DATE DIPECTORS IN 12
ms I trend	familiar With, and door		/NOTE: Regi	stered Age	ent signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE		gent and title if approaute.		13.		ADDITIONO
SIGNATOR	Ignature, typed or printed hards	AND DIRECTORS	DELETE	1.1 TITLE		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12.			T DELETE	12 NAME	1	\ \ (
TITLE	PD					
NAME	DAVIS, WILLIAM D				EET ADDRESS	Change Addition
	1628 STANFORD LANE			_	-ST-ZIP	
STREET ADDRESS	SARASOTA FL 34231		DELETE	2.1 TM	E \	
CITY-ST-ZIP	VP		<u>. </u>	2.2 NAN		
TITLE	TANK MARIE			2.3 STF	REET ADDRESS	□ Change
NAME	DAVIS, MARIE				TY-ST-ZIP	☐ Change ☐ Addition
STREET ADDRESS	1628 STANFORD LANE			3.1 TIT		
CITY-ST-ZIP	SARASOTA FL 34231		DELETE		· ·	
TITLE				3.2 NA		
ì					TREET ADDRESS	☐ Change ☐ Addition
NAME				3.4.0	TTY-ST-ZIP	
STREET ADORES			DELETE	4.1 T	πE	
CITY-ST-ZIP	_				NAME	
TITLE				435	STREET ADDRESS	S □ Change □ Addition
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STREET ADDRE	ss				TITLE	
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ì	{				STREET ADDRES	Change Addition
NAME					4 CITY-ST-ZIP	
STREET ADDR	ESS		☐ DELETE	6.	1 TITLE	
CITY-ST-ZIP			D 00000		2 NAME	
TITLE	{			A	3 STREET ADDRE	565
NAME	\			<u></u> נו	A CITY STATIP	ated in Section 119.07(3)(i), Florida Statutes, I further certify that the information ated in Section 119.07(3)(i), Florida Statutes, I further certify that I am an eignature shall have the same legal effect as if made under oath, that I am an eignature shall have the same legal effect as if made under oath, that I am an eignature shall have the same legal effect as if the same appears in eight of the same appears in
£	PESS			6	1.4 CH 1-51-2#	ated in Section 119.07(3)(i). Florida Statutes if made under oath, that I are a
STREET ADD	(Control of the Control of the Contr		the pot qualify	for the	exemption st	cianature shall have the Satt Florida Statutes; and that my harm

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 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 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 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 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 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 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 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 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 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 supplied with 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 supplied with the inform