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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

## Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000080934 (8)

AMERICAN MARINE COVERING & INTERIORS, INC.

## FILED Jan 27 1998 8:00am Secretary of State



								IEO IIIITA DIBI SEDI
Principal Place of Business Mailing Address								
8095 WEST 21ST LANE 8095 WEST 21ST LANE								
HIALEAH GARDENS FL 33016 HIALEAH GARDENS FL 33016				3		OO NOT HIDITE IN THIS	~~ ~~	
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 09/30/1996		
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	···	Applied For
21		26				65-0697617	∕ ┌	Not Applicable
	#- atc	Suite, Apt. #, etc.				-01/	\$8.7	75 Additional
[22]		27				J. Ochanicate of Glates Desired — L		e Required
City & Stat	e	City & State				6. Election Campaign Financing	\$5	.00 May Be
23	28					Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Count	Country		8. This corporation owes or has paid the cur		
24	25	29	30	iO		Personal Property Tax due June 30.  Yes No		
	Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
AE	BRAMSON, ROBERT M ESQ		8	1	Name			
25 S.E. 2ND AVENUE			-	GO Charact A side		(DO Day Newsbergle New Assessments)		
IN	GRAHAM BUILDING, SUITE 1045	82 Street Add		Street Address	(P.O. Box Number is Not Acceptable)			
	AMI FL 33131		8	3				
}			8	4	City	<b>1</b> 441	85	Zip Code
11 Purculant	to the provinces of Continue CO7 CEC	and 607 1500. Classes Challe					بلب	
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized b	by ti	the corporation's	tion submits this statement for the purpose of s board of directors. I hereby accept the app	cnangii ointmen	ng its registered t as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Statuti	es.	•			
SIGNATURE							<del>-</del>	
	Signature, typed or printed name of registered ager			gent	signature required wi			
12.	OFFICERS AND		13.		····	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	BATISTA, JULIO G	■ DELETE	1.1 TITLE				☐ Char	nge 🔛 Addition
NAME			1.2 NAME	E				
STREET ADDRESS			1.3 STREE	ET AC	ODRESS .			
CITY-ST-ZIP	HIALEAH GARDENS FL		1.4 CITY-		ZIP			
TITLE			2.1 TITLE				Chan	ige 🔲 Addition
NAME			2.2 NAME	2.2 NAME				
STREET ADORESS			2.3 STREE	2.3 STREET ADDRESS				i
CITY-ST-ZIP			2. 4 CITY	2. 4 CITY-ST-ZIP		•		1
TITLE	VP DELETE 3.17		3.1 TITLE				Chan	ge 🔲 Addition.
NAME	SARMINENTO, JUAN C.		3.2 NAME	:	< A	ARMIENTO JUAN (	~ ~	
STREET ADDRESS	8095 WEST 21ST LANE		3.3 STREE	ET AD	DORESS	1111-11- 90110	٠.	
CITY-ST-ZIP	HIALEAH FL		3.4. C/TY-		1			
TITLE .		DELETE	4.1 TITLE		-		☐ Chan	ge Addition
NAME			4. 2 NAMI					
STREET ADDRESS			4.3 STREE		nneres			
CITY-ST-ZIP			4.4 CITY-		ı			į
TITLE		☐ DELETE	4.4 CETY - 5.1 TITLE		AIF		Chan	ge Addition
NAME			5.1 NAME					30 YOURUN
l								
STREET ADDRESS			5.3 STREE					ļ
CITY-ST-ZIP		DC: FTF	5.4 CITY-	ST-Z	ZIP		Lin	
TITLE		☐ DELETE	6.1 TITLE				Chan	ge Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADI	DORESS			
CITY-ST-ZIP			6.4 CITY-					
14. I hereby c	errity that the information supplied wit	n this filing does not qualify fo	or the exemp	ptio	n stated in Sect	tion 119.07(3)(i), Florida Statutes. I further cer	tify 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.

SIGNATURE:

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1/9/98 305-871-6116