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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P96000082485** (9)

DAVIS MARINE ENTERPRISES, INC.

Mailing Address Principal Place of Business **5628 S.W. 25TH STREET** 5628 S.W. 25TH STREET HOLLYWOOD FL 33023 HOLLYWOOD FL 33023-4009 3. Date Incorporated or Qualified 3a. Date of Last Report 10/07/1996 Applied For 2. Principal Flace of Business 2a. Mailing Address 4. FEI Number 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zφ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CORENBLUM, STUART Name 5628 S.W. 25TH STREET Street Address (P.O. Box Number is Not Acceptable) 82 HOLLYWOOD FL 33023 63 84 City 85 Zip Code Pursuant to the provisions of Sections 607.002 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in this state of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and specific production of Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of Sections 607 SIGNATURE o' fegistored agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6)12. 13. DELETE 11 TITLE Change THEF , ant Corenplum NAME 1.2 NAME CR2E034 5428 SW 25 Street STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-ST-2IP CHY-S1-26 Addition DELETE TILLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS COTY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE THE .NAMÉ **3.2 NAME** STEEL LACORESS 3.3 STREET ADDRESS COY-ST-ZIP 3.4. CITY-\$1-ZIP DELETE ☐ Change Addition THE 4.1 TITLE 4, 2 NAME NAM STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-SI-78 DELETE Addition 51 TITLE Change THE 52 NAME NAMI STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CHIM-ST ZE DELETE Change Addition 10.5 6.1 TITLE 6.2 NAME STREET ASSCESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

14. I do 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 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 circular of the corporation or the receiver of investor of the corporation or the receiver of investor of the corporation or the receiver of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of this report is required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if change

City - \$1 - 7(P)

INTED NAME OF SIGNING OFFICER OR DIRECTOR

305-8915041

FILED

Apr 02 1997 8:00am

Secretary of State