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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000094709

1. Corporation Name

GRAND CRIL MARINE CORP.

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90238 007 ***150.00

	one wante com							
Principal Place	of Business	Mailing Address					• •••••	
302 NORTH WO	ODS ROAD	534 WEST 58TH STREET						
PALM BEACH F	L 33480	NEW YORK NY 10019				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed	3 01 AOL	
						11/19/1996		
5 D. () 1 (2)	In an a f During and	20 Mailing Address	_			4. FEI Number	1 1	Applied For
2. Principal Place of Business		2a. Mailing Address				65-0709308	↓ ↓	Not Applicable
21	# -4-	Suite, Apt. #, etc.						Additional
Suite, Apt. #, etc.		27				5. Certifcate of Status Desired	T	Required
City & State	<u> </u>	City & State				6, Election Campaign Financing	\$5.0	May Be
—, ·	•	28				Trust Fund Contribution		to Fees
23 Zip	Country	Zip	Со	untry	,	8. This corporation owes the current year I	ntangible	
24	25	29	30			Personal Property Tax.	Yes	Nο
2	9. Name and Address of Curren			T		10. Name and Address of New Registere	d Agent	
			_	81	Name			İ
VALE	DES-FAULI CORPORATE SERVIC	es, inc.		82	Ctroot 40	Idress (P.O. Box Number is Not Acceptable)		
. 777 S. FLAGLER DR.				02	Sireer Ac	lutess (F.O. Box Number is Not Acceptable)		
SUITE 500 EAST				83				
WES	T PALM BEACH FL 33401						les i 7:	Code
				84	City	F	L 85 Zij	o Code
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statu	ites, the	above	e-named co	progration submits this statement for the nurnose	of changing i	ts registered
office or re	egistered agent, or both, in the State :	of Florida. Such change was :	autnonze	ea by	tne corpora	ation's board of directors. I hereby accept the app	ointment as	registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fi	onua Sia	เนเชร	١.			
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable. (NOT	E. Registere	ed Ager	nt signature regi	uired when reinstating) DATE		
12.		D DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS A	AND DIREC	TORS IN 12
TITLE	PDTS	☐ DELETE	1.1	TITLE			Chang	e Addition
NAME	FAIRCHILD, ROBERT F							
STREET ADDRESS			1.21	NAME				_
OTTALE : ABBITLEOU	534 WEST 58TH STREET				T ADDRESS			
CITY OT ZID	534 WEST 58TH STREET		1.3 8	STREET				_
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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 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, with all other like empowered.

SIGNATURE: