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May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000101854 1. Corporation Name The Maritime Group of Jacksonville, Inc.			
Principal Place of Business 2000 Corporate Sq. Blvd. Jacksonville, FL 32216		Mailing Address 2000 Corporate Sq. Jacksonville, FL 32216	
2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified December 17, 1996		4. FTT Number 59-3422712	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent Corporation Service Company 1201 Hayes Street Tallahassee, FL 32301		10. Name and Address of New Registered Agent	
11. Pursuant to the provisions of Sections 607.054, 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.		12. OFFICERS AND DIRECTORS 11 TITLE ☐ DELETE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP 15 TITLE ☐ DELETE 16 NAME 17 STREET ADDRESS 18 CITY, ST, ZIP 19 TITLE ☐ DELETE 20 NAME 21 STREET ADDRESS 22 CITY, ST, ZIP 23 TITLE ☐ DELETE 24 NAME 25 STREET ADDRESS 26 CITY, ST, ZIP 27 TITLE ☐ DELETE 28 NAME 29 STREET ADDRESS 30 CITY, ST, ZIP 31 TITLE ☐ DELETE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP 35 TITLE ☐ DELETE 36 NAME 37 STREET ADDRESS 38 CITY, ST, ZIP 39 TITLE ☐ DELETE 40 NAME 41 STREET ADDRESS 42 CITY, ST, ZIP 43 TITLE ☐ DELETE 44 NAME 45 STREET ADDRESS 46 CITY, ST, ZIP 47 TITLE ☐ DELETE 48 NAME 49 STREET ADDRESS 50 CITY, ST, ZIP 51 TITLE ☐ DELETE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP 55 TITLE ☐ DELETE 56 NAME 57 STREET ADDRESS 58 CITY, ST, ZIP 59 TITLE ☐ DELETE 60 NAME 61 STREET ADDRESS 62 CITY, ST, ZIP 63 TITLE ☐ DELETE 64 NAME 65 STREET ADDRESS 66 CITY, ST, ZIP	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE ☐ Change ☐ Addition 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP 15 TITLE ☐ Change ☐ Addition 16 NAME 17 STREET ADDRESS 18 CITY, ST, ZIP 19 TITLE ☐ Change ☐ Addition 20 NAME 21 STREET ADDRESS 22 CITY, ST, ZIP 23 TITLE ☐ Change ☐ Addition 24 NAME 25 STREET ADDRESS 26 CITY, ST, ZIP 27 TITLE ☐ Change ☐ Addition 28 NAME 29 STREET ADDRESS 30 CITY, ST, ZIP 31 TITLE ☐ Change ☐ Addition 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP 35 TITLE ☐ Change ☐ Addition 36 NAME 37 STREET ADDRESS 38 CITY, ST, ZIP 39 TITLE ☐ Change ☐ Addition 40 NAME 41 STREET ADDRESS 42 CITY, ST, ZIP 43 TITLE ☐ Change ☐ Addition 44 NAME 45 STREET ADDRESS 46 CITY, ST, ZIP 47 TITLE ☐ Change ☐ Addition 48 NAME 49 STREET ADDRESS 50 CITY, ST, ZIP 51 TITLE ☐ Change ☐ Addition 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP 55 TITLE ☐ Change ☐ Addition 56 NAME 57 STREET ADDRESS 58 CITY, ST, ZIP 59 TITLE ☐ Change ☐ Addition 60 NAME 61 STREET ADDRESS 62 CITY, ST, ZIP 63 TITLE ☐ Change ☐ Addition 64 NAME 65 STREET ADDRESS 66 CITY, ST, ZIP			
14. I hereby certify that the information supplied in this 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 that I am authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if that person is an officer or director of the corporation.		15. I hereby certify that the information supplied in this 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 that I am authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if that person is an officer or director of the corporation.	

SIGNATURE: *Leslie G. Kritzman*

Leslie G. Kritzman

4-28-98

904-724-2864

CR2E034 (10/97)