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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000015568 (3)

ANZO MARINE GROUP, INC.

FILED Jan 30 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address			
6240 EAST MIRROR LAKE DRIVE		E DAIVE		
UNIT 204	UNIT 204	6240 EAST MIRROR LAKE DRIVE Unit 204 Sebastian FL 32958		
SEBASTIAN FL 32958	SEBASTIAN FL 32958			DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
2. Principal Place of Business	2a. Mailing Address			02/14/1997 4. FEI Number Applied For
21	26	— ·		65-0737939 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		SR 75 Additional
22	27			5. Certificate of Status Desired Fee Required
City & State	City & State	<u> </u>		Election Campaign Financing \$5.00 May Be
Zip Countr	28 y Z _{(P}	Count		Trust Fund Contribution
24 25	` 	Count	У	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	30]		Personal Property Tax due June 30. LI Yes SNo 10. Name and Address of New Registered Agent
Burbine, Norman H		8.	Name	, o
6240 EAST MIRROR LA	KE DRIVE		1 0	
UNIT 204		82	Street A	Address (P.O. Box Number is Not Acceptable)
SEBASTIAN FL 32958		83	3	
		84	City	
			,	FL 85 Zip Code
11. Pursuant to the provisions of Sections	tions 607.0502 and 607.1508, Florida Statute	s, the above	ve-named	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and acc	ept the obligations of, Section 607.0505, Flor	rida Statute	sy the corp es.	oration's board or directors. Thereby accept the appointment as registered
SIGNATURE				
	e of registered agent and tile if applicable (NOTE: FFICERS AND DIRECTORS		jent signature i	required when reinstating) DATE ADDITIONS (CLANISES TO DEFICE POR AADDITIONS OF THE PROPERTY
TITLE PSTD	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSTD
NAME BURBINE, NORMA	-	1.2 NAME		BURRING, NORMAN H.
STREET ADDRESS 6240 EAST MIRRO			T ADDRESS	6240 EAST MIRROR LAKE DRIVE, UNIT 204
CITY-ST-ZIP SEBASTIAN FL 32		1.4 CITY-	The state of the s	SEBASTIAN FL 32958
TITLE	DELET E	21 TITLE	0. 1.1	Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREE	T ADDRESS	
CITY-ST-ZIP		2. 4 CITY-	ST-ZIP	i.
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME	1	
STREET ADDRESS		3.3 STREE	1 ADDRESS	
CITY-ST-ZIP		3.4. CITY-	ST-ZIP ,	
TITLE	DELETE	4.1 TITLE	1	☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREE	T ADDRESS	
CITY-ST-ZIP	Deceme	4.4 CETY-	ST - ZIP	
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		•
STREET ADDRESS			TADDRESS	
CITY-ST-ZIP TITLE	DELETE	5.4 CITY - 3	ST-ZIP	T Observe T Asserts
NAME	Las Dittie	6.1 TITLE		L Change L Addition
STREET ADDRESS		6.2 NAME	LADDOCOO	
			ADDRESS	
City-St-ZiP	n supplied with this filing done not qualify for	64 CITY-S		d in Coction 110 07/2/6) Elevide Statutes 16 other partite that the information

indicated on this annual report or supplied with this filling cous not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the informatio 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 eath; 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.