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 # P97000025701 (8)

F & S MARINE AND INDUSTRIAL SERVICES, INC.

Mailing Address Principal Place of Business

FILED Jan 15 1998 8:00am Secretary of State



ATLANTIC BEACH FL 32233		ATLANTIC BEACH FL 32233			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					03/17/1997	٠
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	plied For
21 SAME		26			1 -0 a 3 (ot Applicable
Suite, Apt.		Suite, Apt. #, etc.		- 1 40	- \$8.75	Additional
22		27			5. Certificate of Status Desired	equired
City & State	9	City & State			6. Election Campaign Financing \$5.00	May Be
23		28				to Fees
Zip	Country	Zip	Countr	•	8. This corporation owes or has paid the current year In	
24	25	29	30			No
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
FOODY, ALAN MICHAEL			81	81 Name		
599 ATLANTIC BLVD, SUITE 6			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	-
ATLANTIC BEACH FL 32233			_			
			83			
			84	City	FL 85 Zip	Code
dd Discounsi	to the providings of Continue 607.05	102 and 607 1508 Florida State	toe the abov	a-pamed corn	oration submits this statement for the nurnose of changing i	ts registered
office or r	egistered agent, or both, in the Stat	e of Florida. Such change was	authorized b	the corporation	oration submits this statement for the purpose of changing ion's board of directors. I hereby accept the appointment as	registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, F	iorida Statute	5.		
SIGNATURE	Signature, typed or printed name of registered a	nent and title if applicable (NC)TE: Registered Ac	ent signature require	ed when reinstating) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	R\$ IN 12
TITLE	D	DELETE	1.1 TITLE		Change	☐ Addition
NAME	FOODY, ALAN MICHAEL	_	1,2 NAME	AL	AN MICHAEL FOODY	
STREET ADDRESS	599 ATLANTIC BLVD, SUITE		1.3 STREE	ADDRESS		
CITY-ST-ZIP	ATLANTIC BEACH FL 3223		1.4 CITY-	ST-ZIP		
TITLE	D	DELETE	2,1 TITLE	•	Change	Addition
NAME	STRICKLAND, CARLOUS O		2.2 NAME			
STREET ADDRESS	103 TRUDEE LANE		- 4 0707	I		
CITY-ST-ZIP	INCHOONING EDENOUGH		2.3 STREE	ADDRESS		
	JACKSONVILLE BEACH FL	32250	2,3 STREE			
TITLE	JACKSUNVILLE BEACH FL	32250 DELETE			Change	Addition
TITLE NAME	JACKSUNVILLE BEACH FL		2. 4 CITY		Change	Addition
]	JACKSUNVILLE BEACH FL		2. 4 CITY- 3.1 TITLE 3.2 NAME		Change	Addition
NAME STREET ADDRESS	JACKSUNVILLE BEACH FL		2. 4 CITY- 3.1 TITLE 3.2 NAME	ST-ZIP ADDRESS	Change	Addition
NAME	JACKSUNVILLE BEACH FL		2. 4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE	ST-ZIP ADDRESS	☐ Change	Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP	JACKSUNVILLE BEACH FL	DELETE	2. 4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY-	ST-ZIP ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP TITLE	JACKSUNVILLE BEACH FL	DELETE	2. 4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY- 4.1 TITLE 4. 2 NAME	ST-ZIP ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	JACKSUNVILLE BEACH FL	DELETE	2. 4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4. CITY- 4.1 TITLE 4. 2 NAME	ST-ZIP ADDRESS ST-ZIP ADDRESS	Change	Addition
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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.

SIGNATURE:

01/05/98

904-249.7241