PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPAF TMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000027526

1. Corporation Name

BULOW MARINE CORPORATION

Principal Place of Business 2801 JOHN ANDERSON HIGHWAY FLGLER BEACH FL 32136

Mailing Address

2801 JOHN ANDERSON HIGHWAY FLGLER BEACH FL 32136

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90292 012 ***150.00



DO NOT WRITE IN THIS SPACE

					 Date Incorporated or Qualified 03/26/1997 		
		B Mailing Address			4. FEI Number	Annl	ed For
_2. Principal ⁻¹	ace of Business	2a. Mailing Address			1 1	<u> </u>	Vpplicable
21		26			59-3460871	8.75 Ad	
Suite, Ap.: 3	#, etc.	Suite, Apt. #, etc.			5. Certifca e of Status Desired	Fee Requ	
City & State	e	City & State			6. Election Campaign Financing	\$5.00 м	ау Ве
23		28			Trust Fund Contribution	Added to	Fees
Zip	Count y	Zip	Countr	у	8. This corporation owes the current year lutang		_
24	25	29	30		Personal Property Tax.	Yes []No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Age	nt	
			8	1 Name			
LENS	SSEN, WILLIAM		_		Last (D.O. Day Number in Net Appartable)		
2801 JOHN ANDERSON HWY			8:	2 Street Add	Iress (P.O. Box Number is Not Acceptable)		
FLGL	ER BEACH FL 32136-4702		8:	3			
			8.	4 City	Fi_ 8	5 Zip Cc	de
44 5	to the are delene of So tions COZ OFO	and 607 1508 Florida Statuta	s the abo	Ve-named cov	poration submits this statement for the purpose of cha	nging its re	gistered
office or re	to the provisions of Sections 607.050. egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was au	thorized b	y the corpora	ion's board of d rectors. I hereby accept the appointment	ent as regi	stered
SIGNATURE	Signature, typed or printed nan e of registered agen	Lead title of popularible (NOTE : 6	Societored An	ent signature recu	ed when reinstating) DATE		
	OFFICERS AN		13.	- Granding rode	ADDITIC NS/CHANGES TO OFFICERS AND D	IRECTOR	S IN 12
12.		DELETE	1.1 TITLE			Change	Addition
TITLE	PD		1	1		-	
NAME	LENSSEN, WILLIAM		1.2 NAME				
STREET ADDRES S	2801 JOHN ANDERSON HIGHV	VAY		ET ADDRESS			
CITY-ST-ZIP	FLGLER BEACH FL 32136		1.4 CITY-			Change	Addition
TITLE	DVP	☐ DELETE	2.1 TITLE		L	Change	☐ Addition
NAME	LENSSEN, WILLIAM A		2.2 NAME	:			
STREET ADDRESS	2801 JOHN ANDERSON HWY		23 STRE	ET ADDRESS			
CITY-ST-ZIP	FLGLER BCH FL 32136-4702		2 4 CITY	-ST-ZIP			
TITLÉ		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME	<u> </u>			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIR			34 CITY	-ST-ZIP	_		
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM	E			
				ET ADDRESS			
STREET ADDRESS			4.4 CITY-				
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE] Change	Addition
		C, 5555.5	5.1 TAGE	1	<u> </u>	•	-
NAME				ET ADDRESS			ļ
STREET ADDRESS			5.4 CITY				1
CITY-ST-ZIP		□ DELETE	6.1 TITLE			Change	Addition
TITLE		☐ DEFE1E				1 Augusto	Addition
NAME			6.2 NAME				
CTREET ADDRESS	J		6.3 STRE	ETADDRESS			

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify fc r 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 attach prient with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRE IS

William Lenssen

April 10, 1999 (904)439-2711

CR2E034 (11/98)