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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secrolary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000068369 (2)

SEAL MARINE ENTERPRISES, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address) tabutadik isib natut nabut basik addik addik dabid dusah iduba idula dutia falik idak
	SOUTHWEST 164 TERTRACE FL 33187	14921 SOUTHWEST 164 MIAMI FL 33187	14921 SOUTHWEST 164 TERTRACE MIAMI FL 33187			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
2. Princ	olpal Place of Business	2a. Mailing Address				08/07/1997 4. FEI Number Applied For
21		26				65-0719724 Not Applicable
	a, Apt. #, etc.	Suite, Apt. #, etc.	↑ —			S8.75 Additional
22		27	27			6. Certificate of Status Desired Fee Required
City	& State	City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible
24	25 P. Name and Address of 0	[29]	30			Personal Property Tax due Juné 30. Yes No
		Zurent Registered Agent		B1	Name	10. Name and Address of New Registered Agent
	AMERILAWYER CHARTERED					
	343 ALMERIA AVENUE CORAL GABLES FL 33134			82	Street .	Address (P.O. Box Number is Not Acceptable)
	CONAL GABLES PL 33 134			83		
			;	84	City	FL 85 Zip Code
11. Pursuant to the provisions of Soctions 607.0502 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.						
SIGNATURE						
12.	Signature, typed or printed name of registr OFFICE's	ered agont and title if applicable (NC RS AND DIRECTORS	DTE: Registerer	d Ager	nt signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 10	TLE		Change Addition
NAME	FUNGAROLI, JAMES F	1,15		1.2 NAME		
STREET AD	ET ADDRESS 14921 SOUTHWEST 164 TERTRACE		1.3 \$1	1.3 STREET ADDRESS		
CITY-ST-1	1 11 11 11 11 11 11 11		1.4 CI	TY-SI	- ZIP	
TITLE	SVD	SVD DELETE 2.1		2.1 TITLE Change Ac		
NAME	PLUMLEY, EARL		2.2 N/	AME		
STREET AD	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TERTRACE	2.3 ST	REET	ADDRESS	
CITY-ST-2	MIAMI FL 33187		2. 4 C		7-ZIP	
TITLE		☐ DELE te	3.1 1			Change Addition
NAME			3.2 N/			
STREET AD					ADDRESS	
CITY-ST-2		DELETE	3.4. C 4.1 TO		I - ZIP	Change Addition
NAME		C) occur	4. 2 N			Change Kuchilon
STREET AD	ORFSS		1		ADDRESS	
CITY-ST-2						
TITLE				4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NA			
STREET AD	DRESS		5.3 ST	REET A	ADDRESS	
CITY-ST-2	11P		5.4 CI	IY-SI	- ZIP	
TITLE		DELETE	6.1 TIT	ILE		Change Addition
NAME			6.2 NA	ME		
STREET AD	DAESS		6.3 ST	REET #	ADDRESS	
CITY-ST-Z	IP		6.4 CI	TY-ST	- Z∤P	

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.

(305)826-9090