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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000068369

1. Corporation Name

SEAL MARINE ENTERPRISES, INC.

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90159 012 ***150.00



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Principal Place	e of Business	Mailing Address				i ifitiifiti iin soili inail boill obiil gailt an		40 11114 4	11110 1811 1981	
14921 SOUTHWEST 164 TERTRACE 14921 SOUTHWEST 164 TER						•	•			
MIAMI FL 33187 MIAMI FL 33187						•				
						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed 08/07/1997				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applied For]
21		26				65-0779724 <u> </u>	Not Applicable]
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.	.75 Ad	dditional	
22		27				3. Certificate of Ottatas Desired	<u> </u>	ee Req	uired	<u> </u>
City & State		City & State				6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution Added to Fees				
Zip	,				8. This corporation owes the				7	Į
24	25	29		, oldstall topolity to			<u>⊒No</u>	-		
	9. Name and Address of Curren	t Registered Agent		81 Nam		10. Name and Address of New Register	A Agent			Ì
AMERILAWYER CHARTERED				VI Nam]	
343 ALMERIA AVENUE				82 Stree	et Addres	s (P.O. Box Number is Not Acceptable)				
CORAL GABLES FL 33134				83						1
0011	VIL 0. IDELO 1 E 00 10 1			83						
			;	84 City			85	Zip Co	ode	1
						F			!	ł
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was a	uthorized	by the co	poration	ation submits this statement for the purpose s board of directors. I hereby accept the ap	or changi pointment	as regi	istered	
SIGNATURE										ļ
	Signature, typed or printed name of registered agen	 		Agent signatu	e required w	hen reinstating) DATE				Ó
12.	OFFICERS AN					ADDITIONS/CHANGES TO OFFICERS			S IN 12	
TITLE	PTD SUBJECT TAMES F	☐ DELETE	1.1 TI				☐ Ch	ange	☐ Addition	2
NAME	FUNGAROLI, JAMES F	2405	1.2 NA							3
STREET ADDRESS	14921 SOUTHWEST 164 TERTI	RACE		REET ADDRES	S					Ĺ
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TITLE	SVD	DELETE 211			İ			laliye	Addition	│`
NAME	PLUMLEY, EARL			ME						1
STREET ADDRESS	14921 SOUTHWEST 164 TERTRACE			2.3 STREET ADDRESS			· · ·			
CITY-ST-ZIP	MIAMI FL 33187			2.4 CITY-ST-ZIP			. 🗆 🖰	hanaa	Addition	┨
TITLE	☐ DELETE			3.1 TITLE		•	Ch	ıarıya	III YUUUUUII	
NAME			3.2 NA		_					[
STREET ADDRESS				REET ADDRES	SS		•			
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NAME			4. 2 N		ļ					
STREET ADDRESS	· 			REET ADDRES	is					ĺ
CITY-ST-ZIP		□ DELETE	_	Y-ST-ZIP	 		☐ Ch	2200	Addition	{
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NAME		•								1
STREET ADDRESS				REET ADDRES	~					Ì
CITY-ST-ZIP		☐ DELETE	5.4 CIT	Y-ST-ZIP				33000	Addition	ł
TITLE			6.2 NA				☐ Ch	ands	☐ vaaaoou	
NAME			- 1		_				1	1
STREET ADDRESS				6.3 STREET ADDRESS 6.4 CITY-ST-ZIP						ļ
CITY-ST-7IP	,		■ 6.4 CF	Y-ST-ZIP	1					1

14. 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 attackment with an address, with all other like empowered.

SIGNATURE: