

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000093269

1. Entity Name

TECMARINE HOLDINGS, INC.

Principal Place of Business

2057 SE 35TH STREET
PORT EVERGLADES
FORT LAUDERDALE FL 33316
US

Mailing Address

P.O. BOX 165525
FORT LAUDERDALE FL 33316
US

2. Principal Place of Business

3. Mailing Address

P.O. Box 21647

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Ft. Lauderdale, FL

4. FEI Number NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

33335

Broward

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Britt K. Chester

Street Address (P.O. Box Number is Not Acceptable)

2051 SE 35th Street

City

Ft. Lauderdale

FL

Zip Code
33316

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Britt K. Chester

1/16/01
DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS CHESTER, JEREMY
CITY-ST-ZIP P.O. BOX 165525 20ST SE 35TH ST.
FORT LAUDERDALE FL 33316-5525

TITLE ☐ Change ☒ Addition
NAME P
STREET ADDRESS 2051 SE 35th Street Box 21647
CITY-ST-ZIP Ft Lauderdale, FL 33335

TITLE ☐ Delete
NAME D
STREET ADDRESS CHESTER, BRITT K
CITY-ST-ZIP 2051 SE 35 ST. P.O. BOX 165525 PT E.
FORT LAUDERDALE FL 33316-5525

TITLE ☐ Change ☒ Addition
NAME VP
STREET ADDRESS 2052 SE 35th Street Box 21647
CITY-ST-ZIP Ft Lauderdale, FL 33335

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS Kevin Chester
CITY-ST-ZIP 2051 SE 35th Street
Ft. Lauderdale, FL 33335

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS Kenneth G. Sousa
CITY-ST-ZIP 2051 SE 35th Street
Ft. Lauderdale, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth G. Sousa VP Finance (954) 331-2000

Date

Daytime Phone #

00000001



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)