

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 # P97000100369

1. Corporation Name

GABION MARINE SERVICES, INC.

Principal Place of Business

521 SW 3RD AVE.
1429 SOUTHWEST 1 AVE.
FT. LAUDERDALE FL 33315

Mailing Address

521 SW 3RD AVE.
1429 SOUTHWEST 1 AVE.
FT. LAUDERDALE FL 33315

FILED
Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90071 017 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/24/1997

4. FEI Number

65-0796852

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

WILSON, CHERI
1429 SOUTHWEST 1 AVE.
FT. LAUDERDALE FL 33315

10. Name and Address of New Registered Agent

81 Name

PAUL WILSON

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

521 SW 3RD AVENUE

83

84 City

FT Lauderdale

FL

85 Zip Code

33315

11. Pursuant to the provisions of Sections 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

Cher Wilson

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WILSON, CHERI
STREET ADDRESS 1429 SOUTHWEST 1 AVE.
CITY-ST-ZIP FT. LAUDERDALE FL 33315

DELETE

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D PAUL WILSON

Change Addition

1.2 NAME

PAUL WILSON

1.3 STREET ADDRESS

521 SW 3RD AVENUE

1.4 CITY-ST-ZIP

FT Lauderdale, FL 33315

2.1 TITLE

Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 attachment with an address, with all other like empowered.

SIGNATURE:

Cher Wilson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F034 (11/98)