

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000021929

1. Entity Name

LONE STAR MARINE SERVICES, INC.



Principal Place of Business

2200 ELLER DRIVE
FORT LAUDERDALE, FL 33316

Mailing Address

2200 ELLER DRIVE
ATTN: LEGAL DEPT.
FT. LAUDERDALE, FL 33326

DO NOT WRITE IN THIS SPACE



01112005 No Chg-P CR2E034 (10/03)

4. FEI Number

76-0565277

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE SVPT
NAME DESOSTOA, VINCENT J
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33316

TITLE SVPD
NAME TWAITS, ALAN R
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33316

TITLE SVP
NAME FRANCOIS, LARRY D
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33316

TITLE VPSD
NAME FINCH, STEPHEN B
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33316

TITLE CPD
NAME KURZ, GERHARD E
STREET ADDRESS 2200 ELLER DRIVE
CITY-ST-ZIP FORT LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000330526
04/25/05-80168-004 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SB Finch

Stephen B. Finch

4/18/05

(954) 523-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #