PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCU	MENT # P98000	0307	793				
) Co.po. <b></b> co	717 T-441110	1					
DONE H	RIGHT MARINE, INC.				i säärinäs isä särat iniil käill äärle äälli äärle	. 1010 <b>##</b> [// 1 <b>\$414</b> 1	ALDE also 1804
<u> </u>							
0 : -:- 1 5	of Ducing		- 0 14				LB ( B B d) ( L) ( B B B B B B B B B B B B B B B B B B
Principal Place of Business Mailing Address					ł		
14510 NE 2 COURT 14510 NE 2 COURT NORTH MIAMI BEACH FL 33161 NORTH MIAMI BEACH FL 33161							
) (NOB) (NOB)	DENGITE 33101	HORITI	I WKAMI DENOTITE SU		DO NOT WRITE IN THIS	SPACE	_
ļ					3. Date Incorporated or Qualifed		
}		_			02/19/1998		
2. Principal P	Place of Business	2a, Ma	siling Address		4. FEI Number		ied For
21		26			65-0815876		Applicable
Suite, Apt. #, etc.		ite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	1	
22   27   City & State - City & State City & State				in Flattini Compales Cicentini T	** \$5,00		
23		28	y, a Julio		8. Election Campaign Financing Trust Fund Contribution	Added to	
Zip	Country	Zip	)	Country	8. This corporation owes the current year int	langióle	
24	25	29	30	0	Personal Property Tax.		□ No
	9. Name and Address of Curre	nt Registere	d Agent		10. Name and Address of New Registered.	Agent	
4445	DV A LIEDMAN ODA DA			81 Name	Front Gilbert		Í
MARK A. LIEBMAN, CPA, PA				82 Street A	ddress (P.O. Box Number is Not Acceptable)		
1140 KANE CONCOURSE 5TH FLOOR			793	10 N.E. 2 CT.			
. BAY	HARBOR ISLANDS FL 33154			83			
				84 City A		85 Zip C	ode
				11 1/1	V. Miami FL	·     53	161
11, Pursuant	t to the provisions of Sections 607.050	02 and 607.1	508, Florida Statutes, Such change was suth	, the above-named of torized by the como	corporation submits this statement for the purpose of ration's board of directors. I hereby accept the appoint	changing its r intment as reg	egistered istered
agent.!.	m (amiliar with, and accept the obliga	ations of Sec	ction 607.0505, Florida	a Statutes.	ration's board of directors. I hereby accept the appoin		ŀ
						` * 3	J
SIGNATURE		we-re	C (NOVE 0	aciata mil A control sign after sec	<u> </u>	7	
	Signature, typed or printed name of registered age		- · · · <del>- · · · · · · · · · · · · · · ·</del>	ngistered Agent signature rec	<u> </u>	7	
SIGNATURE 12. ITILE	Signature, typed or printed name of registered age ØFFICERS.AN	O DIRECTO	ORS		sured when reinstating) OATE	7	
12.	Signature, typed or printed name of registered age ØFFICERS.AN	O DIRECTO	ORS	13.	sured when reinstating) OATE	D DIRECTOR	
12.	Signature, typed or printed name of registered age ØFFICERS.AN	O DIRECTO	ORS	13.	sured when reinstating) OATE	D DIRECTOR	
12. TITLE	Signature, typed or printed name of registered age ØFFICERS.AN	O DIRECTO	ORS	13. 1.1 TITLE 1.2 NAME	sured when reinstating) OATE	D DIRECTOR	
12. ITTLE NAME STREET ADDRES	Signature, typed or printed name of registered age	O DIRECTO	ORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	sured when reinstating) OATE	D DIRECTOR	S IN 12
12. ITILE NAME STREET ADDRES CITY-ST-ZIP	Signature, typed or printed name of registered age ØFFICERS.AN	O DIRECTO	DRS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 Y-ST-ZIP	sured when reinstating) OATE	D DIRECTOR	S IN 12
12. ITILE NAME STREET ADDRES CITY-ST-ZIP ITILE	Stonesse trood or priced name of registered age  OFFICERS AN  Pres rolen  Ernos T. G. Ibe  88615 imm s  Hollywood	O DIRECTO	DRS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 Y-ST-ZIP 2.1 TITLE	sured when reinstating) OATE	D DIRECTOR	S IN 12
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP	Stonesse trood or priced name of registered age  OFFICERS AN  Pres rolen  Ernos T. G. Ibe  88615 imm s  Hollywood	O DIRECTO	DRS  DELETE  SOLUTION  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 GITY-ST-ZIP	sured when reinstating) OATE	ID DIRECTOR Change	Addition St.
12. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS	Stonesse trood or priced name of registered age  OFFICERS AN  Pres rolen  Ernos T. G. Ibe  88615 imm s  Hollywood	O DIRECTO	DRS DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y. \$T-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 GITY-ST-ZIP 3.1 TITLE	sured when reinstating) OATE	D DIRECTOR	S IN 12
12. ITTLE NAME STREET ACCRES CITY-ST-ZIP ITTLE NAME STREET ACCRESS CITY-ST-ZIP - ITTLE NAME	Street, trood or priced name of registered age  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Hollywood	O DIRECTO	DRS  DELETE  SOLUTION  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 GITY-ST-ZIP 3.1 TITLE 3.2 NAME	sured when reinstating) OATE	ID DIRECTOR Change	Addition St.
12. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP - ITTLE NAME STREET ADDRESS	Street, trood or priced name of registered age  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Hollywood	O DIRECTO	DRS  DELETE  SOLUTION  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 NAME	sured when reinstating) OATE	ID DIRECTOR Change	Addition St.
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP - TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Street, trood or priced name of registered age  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Hollywood	O DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.2 NAME 3.2 NAME 3.4 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP	sured when reinstating) OATE	ID DIRECTOR Change Change	Addition
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP - ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE	Street, trood or priced name of registered age  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Hollywood	O DIRECTO	DRS  DELETE  SOLUTION  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.2 NAME 3.2 NAME 3.4 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	sured when reinstating) OATE	ID DIRECTOR Change	Addition St.
12. ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP - ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE	Storeway topod or prired name of registered ago  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Holly wood	O DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.4 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	sured when reinstating) OATE	ID DIRECTOR Change Change	Addition
12. ITTLE NAME STREET ACCRES CITY-ST-ZIP ITTLE NAME STREET ACCRESS CITY-ST-ZIP - ITTLE NAME STREET ACCRESS CITY-ST-ZIP ITTLE NAME STREET ACCRESS CITY-ST-ZIP ITTLE NAME STREET ACCRESS	Storeway topod or prired name of registered ago  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Holly wood	O DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.4 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.4 STREET ADDRESS 4.5 STREET ADDRESS 4.5 STREET ADDRESS 5.5	sured when reinstating) OATE	ID DIRECTOR Change Change	Addition
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CONTROL STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Storeway topod or prired name of registered ago  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Holly wood	O DIRECTO	DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 STREET ADDRESS 4.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR Change Change	Addition
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Storeway topod or prired name of registered ago  OFFICERS AN  President  Ernos T. G. Ibe  88615 imms  Holly wood	O DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1. Y-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.4 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS 4.4 STREET ADDRESS 4.5 STREET ADDRESS 4.5 STREET ADDRESS 5.5	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change Change Change	Addition  Addition  Addition
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Stynesure typed or primed name of registered age  OFFICERS AN  Pres 100 / be  Ernes T. G. / be  Est 1 sin m s  Holly wood	O DIRECTO	DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 Y. ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 1.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change Change Change	Addition  Addition  Addition
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Stynesure typed or primed name of registered age  OFFICERS AN  Pres 100 / be  Ernes T. G. / be  Est 1 sin m s  Holly wood	O DIRECTO	DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 Y. ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 1.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change Change Change	Addition  Addition  Addition
12. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Stynesure typed or primed name of registered age  OFFICERS AN  Pres 100 / be  Ernes T. G. / be  Est 1 sin m s  Holly wood	O DIRECTO	DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 Y. ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 1.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change Change Change	Addition  Addition  Addition
12. ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stynesure typed or primed name of registered age  OFFICERS AN  Pres 100 / be  Ernes T. G. / be  Est 1 sin m s  Holly wood	O DIRECTO	DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  12 NAME  1.3 STREET ADDRESS  1.4 Y.ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.5 STREET ADDRESS  5.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change Change Change Change	Addition  Addition  Addition
12. ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Stynesure typed or princed name of registered age  OFFICERS AN  Press rote  Ernes T. G. Ibe  F. G. I. S. I'M M. S.  Holly wood	O DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 Y. ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.2 TAME 6.3 STREET ADDRESS 6.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change Change Change Change	Addition  Addition  Addition

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 affect 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.

954.7610818

**FILED** 

Apr 09, 1999 8:00 am Secretary of State 04-09-1999 90042 045 \*\*\*150.00