

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

FILED
Jun 01, 1999 8:00 am
Secretary of State

06-01-1999 90007 045 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000035471

1. Corporation Name
C.D.H. MARINE INC.



Principal Place of Business P.O. BOX 22263 FORT LAUDERDALE FL 33335 1323 SE 17 STREET, PMB 252 FT. LAUDERDALE, FL 33316	Mailing Address P.O. BOX 22263 FORT LAUDERDALE FL 33335 SAME
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/20/1998

4. FEI Number 65-0833794	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 1323 SE 17 STREET	2a. Mailing Address 26 1323 SE 17 STREET
Suite, Apt. #, etc. 22 PMB 252	Suite, Apt. #, etc. 27 PMB 252
City & State 23 Ft. Laud., FL	City & State 28 Ft. Laud., FL
Zip Country 24 33316 US	Zip Country 29 33316 US

9. Name and Address of Current Registered Agent

HARRIS, CHARLES D JR
1323 SE 17 STREET
STE 252 PMB 252
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name HARRIS, CHARLES D JR
82 Street Address (P.O. Box Number is Not Acceptable) 1511 SEABREEZE BLVD
83
84 City FT. LAUDERDALE FL
85 Zip Code 33316

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 *COHARRIS* (NOTE: Registered Agent signature required when reinstating) DATE 1 June 99

12. OFFICERS AND DIRECTORS

TITLE D	<input type="checkbox"/> DELETE
NAME HARRIS, CHARLES D JR	
STREET ADDRESS P.O. BOX 22263 1323 SE 17 STREET, PMB 252	
CITY-ST-ZIP FORT LAUDERDALE FL 33335- 33316	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS 1323 SE 17 STREET, PMB 252	
1.4 CITY-ST-ZIP 33316	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *COHARRIS* DATE 1 June 99 DAYTIME PHONE # 314-422-3015

CRZE034 (1/98)