2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED Apr 22, 2000 8:00 am Secretary of State DOCUMENT # **P98000041791** 1. Entity Name MARINE MANUFACTURER'S SUPPLY, INC. 04-22-2000 90091 014 ***150.00 Mailing Address Principal Place of Business 4201 MILLER AVENUE 4201 MILLER AVENUE WEST PALM BEACH FL 33405-2625 WEST PALM BEACH FL 33405 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0834571 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BIRDSALL, ROBERT P Street Address (P.O. Box Number is Not Acceptable) **4201 MILLER AVENUE** WEST PALM BEACH FL 33405 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PN 🔀 Change Addition ☐ Delete TITLE TITLE BIRDSALL, ROBERT P NAME NAME STREET ADDRESS **4201 MILLER AVENUE** STREET ADDRESS CITY-ST-ZIP **WEST PALM BEACH FL 33405** CITY-ST-ZIP Addition Delete TITLE BETANCOURT, JOSE M NAME 291 SANDPIPER AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP ROYAL PALM BEACH FL 33411 ☐ Delete ☐ Change ☐ Addition TITLE TITLE BETANCOURT, LAZARA NAME NAME STREET ADDRESS 291 SANDPIPER AVE. STREET ADDRESS CITY-ST-ZIP **ROYAL PALM BEACH FL 33411** CITY-ST-ZIF ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS 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

Jose M. Betancou