## **FILED** May 10, 1999 8:00 am Secretary of State 05-10-1999 90117 006 \*\*\*150.00

## **PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine और भीड

Secretary of State DIVISION OF CODDODATIONS

	1999			-1	
DOCUMENT # P98000057916					_
•	MARINE EAST, INC.				
(F) GLODAL	MATINE CAST, INC.			N HARMANIA AND REPORT NAMED AND A CONTROL OF THE CO	AN ANTAN HARRI REPUBNIKAN ANTAN ANTAN
A Company					
Principal Plac	e of Business	Mailing Address		14811881 118 12121 12111 22111 22111 23111 23111	is fires 16 field 18 fill 16 fires 2 to 2 fill 16
1301 SE 22ND	AVE. #3	1301 SE 22ND AVE. #3		1	
POMPANO BE	NCH FL 33062	POMPANO BEACH FL 33062		DO NOT WRITE IN TH	S SPACE
				3. Date Incorporated or Qualified	7
				06/29/1998	
2. Principal F	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 10	Box 3081	Suite, Apt. #, etc.	<u>තහ දෙරසි/.</u>	65-0843462	Not Applicable \$8.75 Additional
Suite, Apt.	#, etc.	27		5. Certificate of Status Desired	Fee Required
City, & Stat	B	City & State		6. Election Campaign Financing	\$5.00 May Be
23 1304		28 BOWTON'S	Seach, Fl	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
<u>4</u> 334		29 33436 3	<u> </u>	Personal Property Tax.  10. Name and Address of New Registere	Yes No
	9. Name and Address of Current R	tegistered Agent	81 Name -		
BILIE: INCTIN				DAVID HOFFMAN	
1301 SE 22ND AVE. #3			82 Street Addr	ress (P.O. Box Number is Not Acceptable)  NEW LAKE DO	ive
PON	IPANO BEACH FL 33062		83		
			84 City		85 Zip Code
			1 1 12~ 01	stod Beach F	L     ママリン/_
11. Pursuant	to the provisions of Sections 607.0502 a	ind 607.1508, Florida Statutes	, the above-named corp horized by the corporation	oration submits this statement for the purpose ones board of directors. I hereby accept the app	of changing its registered ointment as registered
agent. I a	im familiar with, and accept the obligation	ns of, Section 607.0505, Florid	la Statutes.	oration submits this statement for the purpose on's board of directors. I hereby accept the app	
SIGNATURE	Signature, bypad or printed name of registered agent is		agistared Agent signature require	5-9	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	ND DIRECTORS IN 12
TITLE	DAVID HOFFMAN	☐ DELETE	1.1 TITLE		NND DIRECTORS IN 12 Change Addition
NAME	OWNER	•	12 NAME		
STREET ADORESS	414 NEW LAKE I		1.3 STREET ADDRESS		E
CITY-ST-ZIP	Boynton Beach, Flor	rida 33426	1.4 CITY+ST-ZIP 2.1 TITLE		Change Addition
TITLE		CT DELETE	21 I/IE 22 NAME		
STREET ADDRESS	)		2.3 STREET ADDRESS		}
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME	~	<u></u> .	3.2 NAME		-
STREET ADDRESS			33 STREET ADDRESS		
CTY-ST-ZP		☐ DELETE	3.4. CITY-ST-ZIP	<del></del>	Change Addition
TITLE		□ nere ie	4.1 TILE 4.2 NAME		J
NAME STREET ADDRESS			4.3 STREET ADDRESS		]
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP	2 Tan	——————————————————————————————————————	5.4 CITY-ST-ZIP		Cichana Ciadelian
TTLE .		☐ DELETE	6.1 TITLE		Change Addition
NAME 1	•		62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		[

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:

SIGNATURE: