

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

04-14-2003 90937 046 ***150.00

DOCUMENT # P98000058727



1. Entity Name
BLUE MARLIN MARINE CONSTRUCTION, INC.

Principal Place of Business
**1757 SAN MARCO
MARCO ISLAND FL 34145**

Mailing Address
**6132 WESTPORT LANE
NAPLES FL 34116**



2. Principal Place of Business
118 S Barfield Dr Suite A

3. Mailing Address
118 S Barfield Dr Suite A

☒ CHECK HERE IF MAKING CHANGES

City & State
Marco Island, FL

City & State
Marco Island, FL

4. FEI Number
65-0852161

Applied For
☐ Not Applicable

Zip
34145

Country
US

Zip
34145

Country
US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FAGA, ANTONIO ESQ.
375 12TH AVE., SOUTH
NAPLES FL 34102**

Name
Quinn, Jeffrey C
Street Address (P.O. Box Number if Not Acceptable)
118 S Barfield Dr
City
Marco Island FL **34145**

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PUCCIA, PAULINE ☐ Delete
13105 VANDERBILT DR #301
NAPLES FL 34110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MANN, GREG ☐ Delete
3980 LEEWARD PASAGE WAY #104
BONITA SPRINGS FL 34134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
VALLADARES, ARAIS ☐ Delete
1101-A SUN CENTURY RD
NAPLES FL 34110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Puccia, Pauline ☒ Change ☐ Addition
6132 Westport Lane
Naples, FL 34116

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Mann, Greg ☒ Change ☐ Addition
6132 Westport Lane
Naples, FL 34116

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Valladares, Arais ☒ Change ☐ Addition
118 S Barfield Dr Suite A
Marco Island FL 34145

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Signature Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/03 **239-642-4284**
Date Daytime Phone #

CR2E034 (10/02)