

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

05-05-2003 90701 043 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000103973 1. Entity Name MARINE DRIVE, INC.																											
Principal Place of Business 2601 SW 31 ST., BAY 301 FT. LAUDERDALE, FL 33312		Mailing Address C/O SOUTH BROWARD ACCOUNTING 1152 N UNIVERSITY DR STE 202 PEMBROKE PINES, FL 33024																									
2. Principal Place of Business 15 MARY STREET Suite, Apt. #, etc.		3. Mailing Address State, Apt. #, etc.																									
City & State INGLIS FL		City & State																									
Zip 33449		Country USA																									
4. FEI Number 85-0884081		Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent REHARD, RANDY C 2601 SW 31 ST., BAY 301 FT. LAUDERDALE, FL 33312		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 15 MARY STREET City INGLIS																									
State FL		Zip Code 33449																									
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 _____ DATE _____ (Signature, typed or printed name of registered agent and FEI # apply each. (NOTE: Registered Agent's signature required when a new agent is added.)																											
FEE: \$150.00 After May 1, 2003 Fee will be \$150.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: center;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> </thead> <tbody> <tr> <td style="width: 50%; padding: 5px;"> TITLE D NAME REHARD, RANDY C STREET ADDRESS 2601 SW 31 ST., BAY 301 CITY-ST-ZIP FT. LAUDERDALE, FL 33312 </td> <td style="width: 50%; padding: 5px;"> ☐ Delete </td> <td style="width: 50%; padding: 5px;"> TITLE 15 MARY STREET STREET ADDRESS INGLIS FL 33449 CITY-ST-ZIP </td> <td style="width: 50%; padding: 5px;"> ☒ Change ☐ Addition </td> </tr> <tr> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Delete </td> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Delete </td> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Delete </td> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Delete </td> <td style="padding: 5px;"> TITLE NAME STREET ADDRESS CITY-ST-ZIP </td> <td style="padding: 5px;"> ☐ Change ☐ Addition </td> </tr> </tbody> </table>				10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE D NAME REHARD, RANDY C STREET ADDRESS 2601 SW 31 ST., BAY 301 CITY-ST-ZIP FT. LAUDERDALE, FL 33312	☐ Delete	TITLE 15 MARY STREET STREET ADDRESS INGLIS FL 33449 CITY-ST-ZIP	☒ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 179.07(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: Randy C. Rehard		4-14-03 352 4475063																									

11037058



☒ CHECK HERE IF MAKING CHANGES

CH2034 (10/02)