2000 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jun 05, 2000 8:00 am
Secretary of State
05-03-2000 90108 038 ***150.00

DOCUMENT # P99000010879
Entity Name
MARE NOSTRUM INC.

Principal Place of Business
504 S. TAMIAMI TRAIL
Bldg 1, Suite 2
Nokomis, FL. 34275

Mailing Address
(Same)

Principal Place of Business	3. Mailing Address
504 S. TAMIAMI TRAIL	504 S. TAMIAMI TRAIL
Suite, Apt. #, etc. Bldg 1, Suite 2	Suite, Apt. #, etc. Bldg 1, Suite 2
City & State Nokomis, Florida	City & State Nokomis, Florida
Zip 34275 Country U.S.A.	Zip 34275 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0893452 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Stephen Boone, ESQ.
1001 Avenida del Circo
Venice, FL. 34285
tel. # 941-488-6716

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its Intangible tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
Ruben L. Rios PDST 411 Citrus Ave Nokomis, FL. 34275	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
Jennifer Yunker-Rios VP 411 Citrus Ave. Nokomis, FL. 34275	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
Michael Hasley United States Coast Guard St. Petersburg, Florida	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

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

SIGNATURE: Ruben L. Rios President Mare Nostrum Inc. 941-485-1522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #