

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90023 044 ***150.00

DOCUMENT # P99000061947 ✓
1. Entity Name
 m r i n e t . n e t , I n c o r p o r a t e d

Principal Place of Business
 135 Lake Destiny Tr.
 Altamonte Springs, FL 32714
Mailing Address
 135 Lake Destiny Tr.
 Altamonte Springs, FL 32714

2. Principal Place of Business
 2170 LANDEER ST
3. Mailing Address
 2170 LANDEER ST
 Suite, Apt. #, etc.

City & State
 RENO, NV
City & State
 RENO, NV
Zip
 89509
Country
 USA

4. FFI Number
 59-3599463
Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 Business Filings Inc.
 1000 West Ave. #1114
 Miami Beach, FL 33139

7. Name and Address of New Registered Agent
Name
 JIM CUMMINS
Street Address (P.O. Box Number is Not Acceptable)
 798 Clear Lake Road
City
 COCOA
FL
Zip Code
 32922

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 *Jim Cummins* JIM CUMMINS **DATE** May 1, 2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CUMMINS, JIM E. ☐ Delete 798 Clear Lake Rd Cocoa, FL 32922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Nicholaides, MARIO A ☐ Delete 5205 Falcon Blvd. Cocoa, FL 32920
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVID P. SALVADORINI ☐ Delete 135 Lake Destiny Trail Altamonte Springs, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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	DAVID P. SALVADORINI ☒ Change ☐ Addition 2170 LANDEER ST. RENO, NV 89509
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

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

SIGNATURE: *David P. Salvadorini* DAVID P. SALVADORINI **DATE** May 1, 2001 **Daytime Phone #** 775-770-2119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)