

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

FILED  
May 27, 2002 8:00 am  
Secretary of State

05-27-2002 90447 009 \*\*\*150.00

DOCUMENT # P990000082175

1. Entity Name

Marine Concepts, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1155 Anclote Rd. #B

Suite, Apt. #, etc.

#B

City & State

Tarpon Springs

Zip

34689

Country

3. Mailing Address

1155 Anclote Rd.

Suite, Apt. #, etc.

City & State

Florida

Zip

Country

USA

4. FEI Number

59-3598759

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

DO NOT WRITE  
IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

January 1 - May 31 Fee is \$150.00  
After May 31 Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | Darin Halfmann<br>Tarpon Springs, Fl. 34689  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | Michael Caswell<br>Tarpon Springs, Fl. 34689 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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DO NOT WRITE  
IN THIS SPACE

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

SIGNATURE: Jeannette L. Mitchell/Accountant

05/01/2002

227-942-0033