

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000088166

1. Entity Name

OCEAN HIGH PERFORMANCE MARINE, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90790 023 ***150.00

Principal Place of Business

Mailing Address

1901 NW 18TH ST.
POMPANO BEACH FL 33069

1901 NW 18TH ST.
POMPANO BEACH FL 33069-1665

2. Principal Place of Business

1901 N.W. 18th St.

3. Mailing Address

1901 N.W. 18th St.

Suite, Apt. #, etc.

Bldg. D North

Suite, Apt. #, etc.

Bldg. D North

City & State

Pompano Beach, FL

City & State

Pompano Beach, FL

Zip

33069-1665

Country

USA

Zip

33069-1665

Country

USA

4. FEI Number

65-0959428

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FOX, LEO A
133 BOCA RATON RD.
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name

Berit Spaeth

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

1901 N.W. 18th St.

Bldg. D North

City

Pompano Beach,

FL

Zip Code

33069-1665

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

Berit Spaeth

Berit Spaeth

4/27/00

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)

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

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME President
STREET ADDRESS Berit Spaeth
CITY-ST-ZIP 1901 N.W. 18th St., Bldg D North
Pompano Beach, FL 33069-1665

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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:

Berit Spaeth

4/27/00

863-701-0101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #