

2000 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
Jun 05, 2000 8:00 am
Secretary of State

05-09-2000 90009 037 ***150.00

DOCUMENT # P99000103806

1. Entity Name

BRINE DOCK & SHORE CONSTRUCTION, INC.

Principal Place of Business
 2110 NE 42ND ST. SUITE 6B
 LIGHT HOUSE POINT FL 33064

Mailing Address
 2110 NE 42ND ST. SUITE 6B
 LIGHT HOUSE POINT FL 33064

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0958830

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRISON, BRIAN J
2110 NE 42ND ST. SUITE 6B
LIGHT HOUSE POINT FL 33064

Name

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

City

FL

Zip Code

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)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **PRESIDENT**
 STREET ADDRESS **Brian J. Harrison**
 CITY-ST-ZIP **2110 NE 42nd St. Lighthouse Point, FL - 33064**

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

TITLE Delete
 NAME
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TITLE Change Addition
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TITLE Change Addition
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Brian J. Harrison

4/25/00

954992-6462

CR2E034 (9/99)