

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107695

1. Entity Name

VALUE MARINE INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90191 042 ***150.00

Principal Place of Business

Mailing Address

4381 S.W. 100 TERR.
DAVIE FL 33328

4381 S.W. 100 TERR.
DAVIE FL 33328

2. Principal Place of Business

3300 SW 117 AVENUE

Suite, Apt. #, etc.

3. Mailing Address

PO BOX 540528

Suite, Apt. #, etc.

City & State

DAVIE, FL

Zip

33330

Country

City & State

OPA LOCKA, FL

Zip

33054-0528

Country

4. FEI Number

65-0968913

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARR, JOY ESQ.
1000 PONCE DE LEON BLVD.
SUITE #320
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

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

TITLE DPT
NAME KLAPPERT, RAYMOND
STREET ADDRESS 3634 N.W. 78TH TERR.
CITY-ST-ZIP HOLLYWOOD FL 33024 ☐ Delete

TITLE DVS
NAME DESSBERG, VICTOR
STREET ADDRESS 4381 S.W. 100 TERR.
CITY-ST-ZIP DAVIE FL 33328 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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 DVS
NAME DESSBERG, VICTOR
STREET ADDRESS 3300 SW 117 AVENUE
CITY-ST-ZIP DAVIE, FL 33330 ☒ Change ☐ Addition

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

VICTOR R. DESSBERG 2-23-00 705-389-1286

CR2000 7/0/00