SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

14. I hereby certify that the information supplied with indicated on this annual report or supplied that

an officer or director of the corporation in Block 12 or Block 13 if changed, or o

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS** DOCUMENT # S09270 (7)SEASPORT MARINE SERVICES, INC. Principal Place of Business Malting Address 1095 NORTH A1A 1095 NORTH A1A JUPITER FL 33477 JUPITER FL 33477 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 10/15/1990</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0304861 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GARY, JOHN W III 701 US HWY ONE, STE 402 82 Street Address (P.O. Box Number is Not Acceptable) N PALM BEACH FL 33408 83 84 City 85 Zip Code Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSTD TITLE DELETE 1.1 TITLE NAME HANES, DAVID 1.2 NAME STREET ADDRESS 10**95** NORTH A1A 1.3 STREET ADDRESS Jupiter Fl CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE Change Addition ROGERS, LAURA NAME 2.2 NAME 1095 NO. A1A 2.3 STREET ADDRESS STREET ADDRESS JUPITER FL 2.4 CITY-ST-ZIP CITY-ST-ZIF 3.1 TITLE TITLE DELETE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE TITLE DELETE ___ Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZiP

Ais filing does not qualify for the exemption stated in section 119.07(3)(i). Florida Statutes. I further certify that the information annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am effect or trustee empowered to execute this report as required by Chapter 607, Figrida Statutes; and that my name appears the proof with an address.

FILED Aug 19 1998 8:00am

CR2E034 (5/98)