FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S61745

J & P MARINE SERVICE, INC.

riled
Feb 18, 1999 8:00am
Secretary of State

02-18-1999 90036 042 ***150.00



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Principal Place of Business Mailing Address							
1126 S. FEDERAL HWY. 1126 S. FEDERAL HWY.					•		•
SUITE 438		SUITE 438			DO NOT WRITE IN 3	THIS SPACE	
FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316					3. Date Incorporated or Qualifed		
					06/24/1991	_	
Principal Place of Business 2a. Mailing Address				-	4. FEI Number Applied For		
2. Transpart add of Summer		26			65-0275812		lot Applicable
21					5. Certificate of Status Desired	• -	Additional
22		27			5. Cermicale of Citatos Scotto		Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees		
Zip Country		Zip Country		8. This corporation owes the current year Intangible			
24	25	29 30	0		Personal Property Tax.		21146
	9. Name and Address of Currer	nt Registered Agent	81	Nama	10. Name and Address of New Registe	steu Agent	
	**** .005011 O ID	•	01	Name			
and the second second	TER, JOSEPH C JR.		82 Street Ad		ress (P.O. Box Number is Not Acceptable)	•	
	S. FEDERAL HIGHWAY				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	v 818 11 X 12 1 1 1 1	81211 \$1811 1131
	TE 438		83			· 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
FI.	LAUDERDALE FL 33316		84	City	The state of the s	85 Zip	Code 7
	_					FL T	to societored
	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations.				poration submits this statement for the purpo ion's board of directors. I hereby accept the a	appointment as i	registered
SIGNATURE	Signature, typed or printed name of registered age	ot and title if applicable. (NOTE: R	egistered Age	nt signature require	ed when reinstating) DA		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	e ☐ Addition
NAME	POTTER, JOSEPH C JR		1.2 NAME				
STREET ADDRESS	4400 C EEDEDAL LIMIN #400		1.3 STREE	TADORESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			☐ Change	≘ ☐ Addition
NAME		•	2.2 NAME				
STREET ADDRESS	3		2.3 STREE	T ADDRESS		÷	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			- Addison
TITLE		☐ DELETE	3.1 TITLE			☐ Chang	e
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ET ADDRESS		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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NAME			4, 2 NAME	·			
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CITY-ST-ZIP		<u> </u>	4.4 CITY-	ST-ZIP		T Che	e Addition
TITLE		☐ DELETE	5.1 TITLE			☐ Chang	e Panamou
NAME			5.2 NAME				
STREET ADDRESS	s		5.3 STRE	ET ADDRESS			N.
CITY-ST-ZIP	13			i			
TITLE			5.4 CITY-		•	Choose	e □ Addition
		☐ DELETE	5.4 CITY- 6.1 TITLE		<u> </u>	☐ Chang	e 🔲 Addition
NAME		☐ DELETE	5.4 CITY- 6.1 TITLE 6.2 NAME		<u> </u>	☐ Chang	e Addition
NAME STREET ADDRESS	s	☐ DELETE	5.4 CITY- 6.1 TITLE 6.2 NAME			☐ Chang	e Addition

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 if report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an accurate or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the informindicated on this annual repo officer or director of the corp Block 12 or Block 13 if charts.

SIGNATURE: