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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY - ST - ZiP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1997 8:00am

Secretary of State

561-743-8400

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$83282

(1)

MARINE TECH SERVICES, INC.

Principal Place of Business Mailing Address							DHUM BIUM UI	811 4 1811 8781	II MIĐIL LEUI	
308 TEQUESTA DRIVE TEQUESTA FL 33469			308 TEQUESTA DRIVE TEQUESTA FL 33469-3092							
							3. Date Incorporated or Qualified 09/26/1991		te of Last 2/1996	Report
2. Principal Pl	ace of Business	2a.	Mailing Address				4. FEI Number 65-0317878			Applied For Not Applicable
Suite, Apt. i	#, elc Svite 27	27	Suite, Apt. #, etc.	27			5. Certificate of Status Desired	13	\$8.75	Additional Required
City & State	?		City & State				8. Election Campaign Financing		\$5.00	May Be
23		28		<u>-</u>			Trust Fund Contribution			to Fees
Zip	Country		Zip		untry	<i>(</i>	8. This corporation has liability for it			s. 199.032,
24	25 Name and Address of Curren	25 29 30 Name and Address of Current Registered Agent					Florida Statutes Syes No 10. Name and Address of New Registered Agent			
MON		ı neyıs	recen where		81	Name	IU. Name and Address of New He	hatatan y	gen	
	ŒE, CRAIG D. TEQUESTA DRIVE				Ľ.	- vanc				
	UESTA FL 33469				82	Street Adda	ress (P.O. Box Number is Not Acceptab	le)		
124					83	•				
					84	City			les 7	Code
								FL		
11. Pursoant to office or reagent. Lar	to the provisions of Sections 607.050) egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 60 of Floric ations of	07.1508, Florida Statu da. Such change was , Section 607.0505, Fl	tes, the a authorize lorida Sta	ibovi id by itute:	e-named corp y the corporat s.	poration submits this statement for the p lion's board of directors. I hereby accep	urpose of t the appo	changing sintment a	its registered s registered
SIGNATURE .									····	
12.	Signaram typed or printed name of registered age OFFICERS AND			TE Registere	o Age	ent signature requir	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	DIRECTO	DC (A) 10
TITLE	S OFFICERS AND	J DINEC	DELETE	1.1 T	ITI F	-	ADDITIONS/CHANGES TO OFFIC	ENO AMU	Change	
NAME	MCKEE, CRAIG D			1.2 N						
STREET ADDRESS	953 TOWNHALL DRIVE					ADDRESS				
C(TY - S1 - Z(P	JUPITER FL					ST-ZiP				
TITLE	T		DELETE	2.1 [71 21			Change	Addition
NAME	ADAMEK, DENNIS J			2.2 N	IAME					
STREET ADDRESS	18430 SE LAKESIDE DRIVE			2.3 S	TREET	ADDRESS				
CITY - ST - ZIP	TEQUESTA FL			2.40	OHTY-:	ST-ZIP				
TITLE		*******	DELETE	3.1 T	ITLE			***************************************	☐ Change	Addition
NAME				3.2 N	IAME	•				
STREET ADDRESS				3.3 S	TREET	ADDRESS				
CITY - ST - 71P				3.4. (CITY-	ST-ZIP		·····		
TITLE			☐ DELETE	4.1 T	ITLE				☐ Change	Addition
NAME				4.28	NAME					
STREET ADDRESS				4.3 \$	TREET	ADDRESS				
CITY-ST-7:P						ST-ZIP				
TITLE			DELETE	5.1 T					Change	1 Addition
NAME				5.2 N					ヘ	$\Pi U \Pi$
STREET ADDRESS						ADDRESS		- 1		11 '
CITY-ST-7:P			DELETE	_		ST - ZIP			Character	- I dalistan
TITLE			☐ DELETE	6.1 T			60000207	340	Change	☐ Addition
NAME				6.2 N			60000207 -01/30/970102 ***173.75	2804	5	
STREET ADDRESS				6.3 \$	IHEET	ADDRESS	***173.75	-: '		

6.4 CITY - ST-ZIP 14. I do 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 annual 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 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 13 if changed, or operation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name