

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 25 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S84074 (1)

1. Corporation Name

MARINE TOWING & SALVAGE COMPANY

Principal Place of Business

**6 EDWARDS PLACE
THE PENTHOUSE-COURTHOUSE-TOWER
KEY LARGO FL 33037
US**

Mailing Address

**6 EDWARDS PLACE
THE PENTHOUSE-COURTHOUSE-TOWER
KEY LARGO FL 33037
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/01/1991

3a. Date of Last Report

05/12/1994

4. FEI Number

NOT APPLICABLE

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 6 Edwards Place

Suite, Apt. #, etc.

2a. Mailing Address

26 6 Edwards Place

Suite, Apt. #, etc.

22 City & State

23 Key Largo FL

Zip

Country

24 33037

25 US

27 City & State

28 Key Largo, FL

Zip

Country

29 33037

30 US

8. Name and Address of Current Registered Agent

**ALWARDT, VIRGINIA
6 EDWARDS PLACE
KEY LARGO FL 33037**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. 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

Virginia Alwardt

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

4-21-95

DATE

12. OFFICERS AND DIRECTORS

TITLE **S**
NAME **ALWARDT, VIRGINIA**
STREET ADDRESS **6 EDWARDS PL**
CITY- ST- ZIP **KEY LARGO FL**

TITLE
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CITY- ST- ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Virginia Alwardt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-95

DATE

(305) 451-0811

DAYTIME PHONE #