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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # V03856

(4)

RIO MARINE INC.



Principal Place	e of Business	Mailing Address	g Address		1 19841 811814 89198 1894 48194 8414			
2327 N ANDREWS AVE FT LAUDERDALE FL 33311		2327 N ANDREWS AVE FT LAUDERDALE FL 33311						
r vocan	Grace 12 avenue				3. Date Incorporated or Qualified 12/30/1991	3a, Date	of Last I	
. Principal P	Place of Business	2a. Mailing Address			4. FEI Number			Applied For
		26			65-0304300			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & Stat	te	City & State			Election Campaign Financing Trust Fund Contribution			DO May Be ed to Fees
<u> </u> Ζιρ	Country	Zip	Country	,	8. This corporation has liability for	intangible ta	k under :	s 199.032,
]	25	29	30		Florida Statutes	x ∑ 1No		
·	9. Name and Address of (Current Registered Agent			10. Name and Address of New I	Registered /	gent	
			81	Name				
GRYSKO, CAROL JUNE 225 NORTH GORDON ROAD			82 Street Ad		dress (P.O. Box Number is Not Acceptable)			
	UDERDALE FL 33301		83					
			84	City		FI	85 2	Zıp Code
				1	oration submits this statement for the pu	r L		
	Suppore bried or proved name of red ste	red agent and title if applicable (NS	OTF: Registered Age	nt signature require	ed when rainslating)	DATE		
	Signature, typical or printed name of register			ni signature require			DIDECT	ODE IN 10
	Signature, typied or printed name of register OFFICE	RS AND DIRECTORS	13.		ed when reinsleding) ADDITIONS/CHANGES TO OF	FICERS AND		
1LF	Signature, typed or printed name of register OFFICE	RS AND DIRECTORS	13. 1 1 TITLE			FICERS AND	DIRECT Change	
TLF NME	Signature, typed or printed name of register OFFICE D GRYSKO, CAROL JUN	RS AND DIRECTORS DELETE	13. 1 1 TITLE 1.2 NAME			FICERS AND		
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14. I do hereby contry that the information supplied with this lilling is voluntarily furnished and obes not qualify the activity 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 12 or Block 13 if changed, or on an attachment with an applicans.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

11/96 305-407 Date 305-407