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

May 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name (4)GREEN MACHINE JET SKI, INC. Principal Place of Business Mailing Address 1620 W. 318T PL 17305 NW 87TH AVENUE HIALEAH FL 33012 HIALEAH FL 33015 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0302482 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 26 30 Personal Property Tax due June 30. ☐ Yes ☐ No 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name GARCIA, ARTURO A. 17305 NW 87TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33015 83 City 84 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS TITLE DELETE 1.1 TITLE Change Addition GARCIA, ARTURO A. NAME 1.2 NAME 17305 NW 87TH AVE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL** CRY-ST-ZIP 1.4 CITY-ST-7IP Change DELETE Addition TITLE 2.1 TITLE MONTIEL, MARTHA H. NAME 2.2 NAME 17305 NW 87TH AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS City-St-2IP 3.4. CITY-ST-ZIP T Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filting 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 12 or Block 13 if changed, or on an attachment with an address.

Martha Montre

SIGNATURE:

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