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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V47065

(0)

MARINE PARTNERS INC.

Principal Place of Business

Mailing Address

FILED Apr 20 1998 8:00am Secretary of State



22449 MARTELLA AVE BOCA RATON FL 33433		22449 MARTELLA AVE BOCA RATON FL 334 33			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified ACIDE (1902)			
2. Principal P	lace of Business	2a. Mailing Address			06/25/1992 4. FEI Number	ΠΔ,	oplied For	
21		26				65-0342601 Not App		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	 				Additional	
22		27	27		5. Certificate of Status Desired	, -	equired	
City & State		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 or has paid the current year Intangible			
24	25	29 30			Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent 81					10. Name and Address of New Registered Agent			
PHELAN, MICHAEL				Name				
22449 MARTELLA AVE			82	Street	Address (P.O. Box Number is Not Acceptable)			
BOCA RATON FL 33433				ļ				
~			83	1				
•			84	City		85 Zip	Code	
				<u>L</u>				
11. Pursuant 1	to the provisions of Sections 607.050 egistered agent, or both, in the State)2 and 607.1508, Florida Statute of Florida. Such change was a	s, the abov	e-named v the core	corporation submits this statement for the purpose of coporation's board of directors. Hereby accept the appoint	hanging it	ts registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules.								
SIGNATURE Signature, typed or printed name of registered agent and tifford spot ceptor. (NOTE: Registered Agent signature required when reinstating) DATE								
	Signature, typed or printed name of registered ago			ent signature		SIDECTOR		
12.	P	OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND I	Change	Addition	
NAME	WAYNICK, THOMAS F	7	1.2 NAME		ATTENTO T VONDOR		TAN INDIVIDU	
STREET ADDRESS	1			T ADDRESS	Taxas Sute 1			
CITY-ST-ZIP	MPN 4 4000 F.		1.4 CITY-		HOLLY WOOD FL 3301	9	1	
TITLE			2.1 TITLE	31-ZIr		Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS				ADDRESS	s		1	
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-					
TITLE			3.1 TITLE	01-211		Change	Addition	
NAME			3.2 NAME		_	•	_	
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-				-	
TITLE		☐ DELETE	4.1 TITLE	<u> </u>		Change	☐ Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST - 7/P	^			
TITLE		DELETE	5.1 TITLE	<u> </u>		Change/	Addition	
NAME			5.2 NAME			-1/I	/_ /	
STREET ADDRESS			5.3 STREET ADDRESS		√ //)	4/	$\supset N$	
CITY-ST-ZIP			5.4 CITY-1	-	/// /	l/	~ U	
TITLE			61 TITLE		☐ Change ☐ Addition			
NAME			6.2 NAME		2000024945	200002494462 -04/21/9801013003		
STREET ADDRESS			6.3 STREE	ADDRESS	-U4/21/96U1U13UU:	j		
CITY-ST-ZIP			6.4 CITY-		***150.00			
44 14 1	and the same of th		-					

14. 1 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 recoiver 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 or an attachment with an address.

CICMATUDE.

tailer // Chorlock

4-11-90

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