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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P95000072913 (3)

SEABORNE MARINE, INC.

Principal Place of Business

Mailing Address

915 8TH STREET UNIT 105 MIAMI BEACH FL 33139 915 8TH STREET UNIT 105 MIAMI BEACH FL 33139



						3. Date Incorporated or Qualified 09/19/1995	3a. Date	of Last F	Report
2. Principal F	lace of Business	2a. Mailing Addres	SS			4. FEI Number		1	Applied For
1		26				65-06 143 56	>		Not Applicable
Suite, Apt	#, elc.	Suite, Apt. #, 6	1			5. Certificate of Status Desired See Required Fee Required			
City & Star	te	City & State				Election Campaign Financing     Trust Fund Contribution			00 May Be ad to Fees
Zipi 	Country 25	Ζφ <b>29</b>	30	ountry	,	8. This corporation has liability for in Florida Statutes Yes	intangible ta □ No	k under s	199.032,
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New R	egistered A	gent	* *************************************
4/4	DI DARNI			B1	Name				
	KATZ-BIJL, ROBIN			62	82 Street Address (P.O. Box Number is Not Acceptable)				
915 8TH STREET UNIT 105 MIAMI BEACH FL 33139								<del></del>	
MIM	II BEACH FL 33139			83					
				84	City		FL	<b>85</b> Z	ip Code
	1.11	0 1003 4500 51 11	<u> </u>		L. <u></u>	poration submits this statement for the pur		للل	
SIGNATURE 2.	Signature, typed or pricted name of registered agen	c and tide if applicable.	(NOTE: Register		nt signature requ	uired when reinstating: ADDITIONS/CHANGES TO OFFI	DATE ICEDS AND	DIDECT	ODO IN 12
<b>∠.</b> :LE	OFNOERS AN	DELET			1	ADUITIONS/CHANGES TO OFFI		<del></del>	
iame Iame	KATZ-BIJL, ROBIN	LJ W.FE		TITLE			L.	] Change	☐ Addition
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	MIAMI BEACH FL 33139			STREET					
"Y-S1-7IP	MIAMI BEACH FL 33139		1.4	CITY-S TITLE				1 Change	☐ Addition
114-81-71 <u>9</u> 116	MIAMI BEACH FL 33139 D BIJL, ALBERT	<b>™</b> DELET	1.4 E . 2.1	CITY-5				] Change	Addition
ITY - \$1 - 71P THE AME	MIAMI BEACH FL 33139 D BIJL, ALBERT 915 8TH STREET UNIT 105	<b>™</b> DELET	1.4 E 2.1 2.2	CITY-S TITLE NAME				] Change	☐ Addition
ITY-ST-ZIP THE AMC DREET ADDRESS	MIAMI BEACH FL 33139 D BIJL, ALBERT	<b>™</b> DELET	1.4 E 2.1 2.2 2.3	CITY-S TITLE NAME	ADDRESS			] Change	☐ Addition
TY-SI-7IP HE MM( BEEL ADDRESS HY-SY-7IP	MIAMI BEACH FL 33139 D BIJL, ALBERT 915 8TH STREET UNIT 105	<b>™</b> DELET	1.4 £ 2.1 2.2 2.3 2.4	CITY-S TITLE NAME STREET	ADDRESS			Change	Addition
ITY-SI-7IP FLE AMC BREEL ADDRESS FLY SY-7IP FLE	MIAMI BEACH FL 33139 D BIJL, ALBERT 915 8TH STREET UNIT 105	<b>∑</b> DELET	1.4 E 2.1 2.2 2.3 2.4 E 3.1	CITY-S TITLE NAME STREET CITY-S	ADDRESS				_
CY+SI-ZIP  THE  AME  THEEL ADDRESS  TY SY-ZIP  THE  AME  THEEL ADDRESS	MIAMI BEACH FL 33139 D BIJL, ALBERT 915 8TH STREET UNIT 105	<b>∑</b> DELET	1.4 £ 2.1 2.2 2.3 2.4 £ 3.1 3.2 3.3	CITY-S I TITLE NAME STREET CITY-S I TITLE NAME STREE	ADDRESS ST-ZIP				
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CITY-S1-7IP  JIHF  JAMC  STREET ADDRESS  CHY SY-7IP  THE  JAME  JA	MIAMI BEACH FL 33139 D BIJL, ALBERT 915 8TH STREET UNIT 105	DELETI	E 1.4 E 2.1 E 2.2 E 3.3 E 4.1 E 4.2 E 5.1 E 5.2 E 5.3 E 6.1 E 6.1 E 6.2	CITY-S TITLE NAME STREET NAME STREET NAME NAME NAME NAME NAME NAME NAME NAME	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS			Change Change	Addition  Addition

4.1. To hereby certify that the information supplied with this hing is voluntarily turnished and obes not quality for the exemption stated in Section 119.0/d/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 early that Lam 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.

SIGNATURE:

THE AND TYPE OF PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

305 534 53 73