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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000072913

SEABORNE MARINE, INC.

Principal Place of Business

Mailing Address

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90183 002 ***158.75



915 BTH STREI MIAMI BEACH	et unit 105 Fl. 33139	1602 ALTON RD. Suite 368 Miami Beach FL 33139		3. Date Incorporated or Qualifed	1	
				09/19/1995		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 112 _ 그	oilido 7TH TERRACE	26 7.0. BOX 398	3298	65-0614356	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat		City & State 28 MiAmi BEACH		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the curre	nt year Intangible	
	139 25 USA	29 FL 33239 3	0 USA	Personal Property Tax.	Yes ⊠ No	
14 (12 0 -	9. Name and Address of Current		-	10. Name and Address of New Re	egistered Agent	
			81 Name	BUL, ALBERT		
Biji	. Albert					
915 8TH STREET #105				Street Address (P.O. Box Number is Not Acceptable)		
MIAMI BEACH FL 33139				DILIDO 7TH TERRACI		
IVII	WI DEACH FE 33139		83			
			84 City	AMI BEACH	FL 85 Zip Code 33 13 9	
office or r	to the provisions of Sections 607-0502 egistered agent, or both, in the State of m familiar with, and according obligation	t Florida. Such change was aut	nonzea by the corp	corporation submits this statement for the poration's board of directors. I hereby accept	ourpose of changing its registered the appointment as registered	
-			•		1/18/99	
SIGNATURE	Signature, typed or printed hame of notistered agent	and title if applicable (NOTE: R	egistered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	D	Change Addition	
	BIJL, ALBERT		1.2 NAME	BIJL, ALBERT		
NAME	· · - / · · - · - · .			112 DILIDO 7 TH TERRA	CE	
STREET ADDRESS	915 8TH STREET #105		9		33139	
CITY-ST-ZIP	MIAMI BEACH FL 33139	The section of the se	1.4 CITY-ST-ZIP	MIAMI BEACH, FL	Change Addition	
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME		Ì	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition	
NAME			32 NAME		J	
STREET ADDRESS,			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
		_	4. 2 NAME		İ	
NAME						
STREET ADDRESS			4.3 STREET ADDRESS	j	•	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Change Addition	
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		C Grange C Addition	
NAME			1	•		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			62 NAME		·	
STREET ADDRESS			6.3 STREET ADDRESS			
	l		64 CITY- ST- 7IP	1		

14. I 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 suppliemental 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 chapters, or on an attachment with an address, with all other like empowered.

SIGNATURE: