

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000006610

**Entity Name:** ASSOCIATED MARINE SALVAGE, INC.**Current Principal Place of Business:**1210 SW MELROSE AVENUE  
PORT ST LUCIE, FL 34953**Current Mailing Address:**1210 SW MELROSE AVENUE  
PORT ST LUCIE, FL 34953 US**FEI Number:** 02-0547118**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DIMURO-CLARK, ISABELLA M  
1210 SW MELROSE AVENUE  
PORT ST LUCIE, FL 34953 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** ERIC W SULZBERGER

03/01/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DIMURO-CLARK, ISABELLA M  
Address 1210 SW MELROSE AVENUE  
City-State-Zip: PORT ST LUCIE FL 34953

Title V  
Name DIMURO-CLARK, ISABELLA M  
Address 1210 SW MELROSE AVENUE  
City-State-Zip: PORT ST LUCIE FL 34953

Title S  
Name DIMURO-CLARK, ISABELLA M  
Address 1210 SW MELROSE AVENUE  
City-State-Zip: PORT ST LUCIE FL 34953

Title T  
Name DIMURO-CLARK, ISABELLA M  
Address 4270 NW 107TH AVE  
City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR  
Name DIMURO-CLARK, ISABELLA M  
Address 1210 SW MELROSE AVENUE  
City-State-Zip: PORT ST LUCIE FL 34953

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ISABELLA DIMURO-CLARK

PRES

03/01/2023

Electronic Signature of Signing Officer/Director Detail

Date