

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **521187 (5)**  
1. Corporation Name  
**COMPLETE YACHT SERVICE, INC.**



Principal Place of Business: 200 SW 33RD STREET FT. LAUDERDALE FL 33315  
Mailing Address: C/O FAST - TAX 113 NORTH FEDERAL HWY DANIA FL 33004 US

3. Date Incorporated or Qualified: 12/29/1976  
3a. Date of Last Report: 04/18/1995  
4. FEI Number: 59-1728577  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability or intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25  
2a. Mailing Address: 26 113 NORTH FEDERAL HWY, Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent: FAST-TAX - GERALD J. ADAMS 113 NORTH FEDERAL HIGHWAY DANIA FL 33004  
81 Name: FAST-TAX - GERALD J. ADAMS  
82 Street Address (P.O. Box Number is Not Acceptable): 113 NORTH FEDERAL HIGHWAY  
83 City: DANIA  
84 City: DANIA FL 85 Zip Code: 33004

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) DATE

| 12. OFFICERS AND DIRECTORS             |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|--|--|---|--|
| TITLE: D                               | NAME: MALO, JOSEPH N.<br>STREET ADDRESS: 900 S.W. 31ST ST.<br>CITY-ST- ZIP: FT LAUDERDALE FL | 1.1 TITLE: <input type="checkbox"/> DELETE            | 1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: VD                              | NAME: MALO, LORRAINE<br>STREET ADDRESS: 900 S.W. 31ST ST.<br>CITY-ST- ZIP: FT LAUDERDALE FL  | 2.1 TITLE: <input type="checkbox"/> DELETE            | 2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: STD                             | NAME: FULTON, JEAN<br>STREET ADDRESS: 418 S.W. 18TH COURT<br>CITY-ST- ZIP: FT LAUDERDALE FL  | 3.1 TITLE: <input type="checkbox"/> DELETE            | 3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: PD                              | NAME: MALO, MARK T<br>STREET ADDRESS: 900 SW 31ST ST<br>CITY-ST- ZIP: FT LAUDERDALE FL       | 4.1 TITLE: <input type="checkbox"/> DELETE            | 4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: <input type="checkbox"/> DELETE |  | 5.1 TITLE: <input type="checkbox"/> DELETE            | 5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE: <input type="checkbox"/> DELETE |  | 6.1 TITLE: <input type="checkbox"/> DELETE            | 6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(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 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, changed, or on an attachment with an address.

SIGNATURE: *Jean Fulton* JEAN FULTON - DIRECTOR 5/1/96 (954) 929-5162  
DATE: 5/1/96 DAY: 1 MONTH: 5 YEAR: 1996

CR2E034 (12/95)