FILE NOW: FILING FEE IS \$61.25

NONPROFIT FLORIDA DEPARTMENT OF STATE **OORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** 730130 MIAMI ROWING & WATERSPORTS CENTER, INC. Principal Place of Business Mailing Address 9601 RICKENBACKER CSWY 3832 SHIPPING AVE 3. Date Incorporated or Qualified KEY BISCAYNE FL 33149 MIAMI FL 33146 <u>07/03/1974</u> 4. FEI Number Applied For Not Applicable 59-1952997 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #. etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes □ No 23 28 Country Ζίρ Country ZID 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name KOSOWSKY, HOWARD Street Address (P.O. Box Number is Not Acceptable) 3832 SHIPPING AVE 83 MIAMI FL 33173 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE Director ARELLANO, RAUL NAME 1.2 NAME 8861 SW 82ND STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE . KOSOWSKY, HOWARD 22 NAME NAME 3832 SHIPPING AVE 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP 99148 TITLE DELETE 3.1 TITLE NAME LOPEZ-GOTARDI, CHRISTINE 3.2 NAME STREET ADDRESS 2450 CORDOVA ST 3.3 STREET ADDRESS CORAL GABLES FL 33134 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE n DELETE

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY - ST- ZIP

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FILED Mar 11 1998 8:00am

14. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 Block 12 or Block 13 if changed, ogon an attachment with an address. I further certify that the information

Howard Kosowsky SIGNATURE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

LUZARRAGA, SILVIA

MONTALVO, EDUARDO

MIAMI BCH FL 33139

GUARA, MARCUS

9211 SW 50TH TER.

D

405 N. HIBISCUS DR. 211

3401 NW 82 AV

MIAMI FL 33122

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X Addition

Addition