

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

FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H19097 (5)
 Corporation Name
YACHT CLUB SOUTHEASTERN, INC.



Principal Place of Business 11098 BISCAYNE BLVD., SUITE #402 N. MIAMI FL 33161	Mailing Address 11098 BISCAYNE BLVD., SUITE #402 N. MIAMI FL 33161
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/31/1984		4. FEI Number 59-1979200		Applied For <input type="checkbox"/> Not Applicable
2. Principal Place of Business 21 Suite, Apt. #, etc.		2a. Mailing Address 26 Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
23 Zip Country		28 Zip Country		6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
24 Zip		25 Country		29 Zip
26 Country		30 Country		

9. Name and Address of Current Registered Agent

BEDZOW, MICHAEL
20803 BISCAYNE BLVD
SUITE 200
AVENTURA FL 33180

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PTD	BEDZOW, CHARLES <input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME BEDZOW, CHARLES	11098 BISCAYNE BLVD #402	1.2 NAME	
STREET ADDRESS N. MIAMI FL		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	33161
TITLE VSD	BEDZOW, SARA <input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME BEDZOW, SARA	11098 BISCAYNE BLVD #402	2.2 NAME	
STREET ADDRESS N. MIAMI FL		2.3 STREET ADDRESS	33161
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE VD	SHAPIRO, HOWARD <input checked="" type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME SHAPIRO, HOWARD	11098 BISCAYNE BLVD #402	3.2 NAME	
STREET ADDRESS N. MIAMI FL		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE ASD	SHAPIRO, HOWARD <input checked="" type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME SHAPIRO, HOWARD	11098 BISCAYNE BLVD #402	4.2 NAME	
STREET ADDRESS N. MIAMI FL		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE V	BLANCO, CAMILO <input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	AS
NAME BLANCO, CAMILO	11098 BISCAYNE BLVD SUITE 402	5.2 NAME	
STREET ADDRESS MIAMI FL		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	33161
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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 if changed, or on an attachment with an address.

SIGNATURE: _____ **3/26/98 305/891-2987**

CR2E034 (10/97)