

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000093223

1. Entity Name
SUNSET KEY WATER SPORTS, INC.



Principal Place of Business
**261 FRONT STREET
KEY WEST, FL 33040 US**

Mailing Address
**261 FRONT STREET
KEY WEST, FL 33040 US**



04012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0637859	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GRASSI, DENNIS J
261 FRONT ST
KEY WEST, FL 33040**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000102400
04/05/04-80014-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GRASSI, DENNIS J
STREET ADDRESS	261 FRONT ST
CITY - ST - ZIP	KEY WEST, FL 33040

TITLE	D
NAME	YAWORSKI, GARY W
STREET ADDRESS	261 FRONT ST
CITY - ST - ZIP	KEY WEST, FL 33040

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Dennis Grassi 04/01/04 305 256 1754