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May 05, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000077070

1. Corporation Name THE CAPTAINS READY ROOM, INC.



Principal Place of Business 1121 CONSTANTINE STREET ORLANDO FL 32825 Mailing Address 1121 CONSTANTINE STREET ORLANDO FL 32825

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/31/1998 4. FEI Number 59-3535380 Applied For Not Applicable 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 owes the current year Intangible Personal Property Tax. Yes X No

2. Principal Place of Business 21 4270 Aloma Avenue Suite, Apt. #, etc. 22 114 City & State Winter Park Florida 23 Orton Zip 24 32792 Country 25 Seminole 2a. Mailing Address 26 4270 Aloma Avenue Suite, Apt. #, etc. 27 Suite 114 City & State Winter Park Florida 28 Zip 29 32792 Country 30 Seminole

9. Name and Address of Current Registered Agent MCKEOWN, RICHARD A 1121 CONSTANTINE STREET ORLANDO FL 32825

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 Richard A. McKeown Richard A. McKeown President April 7 1999

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entries for MCKEOWN, RICHARD A and GOEN, JAMIE.

Table with 5 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 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, with all other like empowered.

SIGNATURE: Richard A. McKeown Richard A. McKeown 4/7/99 (407)681-4359

CR2E034 (1/198)