

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000083230

**Entity Name:** ISLAMORADA FISHING OUTFITTERS INC.

**Current Principal Place of Business:**

171 HOOD AVE  
UNIT 16  
TAVERNIER, FL 33070

**Current Mailing Address:**

114 SIOUX STREET  
TAVERNIER, FL 33070

**FEI Number:** 85-3993915

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ANNESSER, JOHN  
2525 PONCE DE LEON BLVD  
SUITE 625  
CORAL GABLES, FL 33134 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name TOWE, RANDY  
Address 114 SIOUX STREET  
City-State-Zip: TAVERNIER FL 33070

Title VP  
Name TOWE, RANDY  
Address 114 SIOUX STREET  
City-State-Zip: TAVERNIER FL 33070

Title TR  
Name TOWE, RANDY  
Address 114 SIOUX STREET  
City-State-Zip: TAVERNIER FL 33070

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** RANDY TOWE

**PRESIDENT**

**04/15/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date