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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

1	1998	(C)	CORPORATIONS	Secretary	of State
1. Corporatio	MENT # 1636 Y BOAT CRUISES INC	95 (0)			
OHAT	1 DON'T CHOIDES INC			I ioriai kirik hikka kirik birka 1818a ikik oraki oki	DEL BEREI BEBEI BEBEI BEBEI 1802
Principal Plac	e of Business	Mailing Address			
3935 HARMOI		3935 HARMONY DRIVE			
FT MYERS FL		FT MYERS FL 33905		DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	OUTFOL
			·	01/01/1950	
<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt	#. elc.	Suite, Apt. #, etc.		59-0649454	Not Applicable \$8.75 Additional
22		27		5, Certificate of Status Desired	Fee Required
City & State	θ	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	 This corporation owes or has paid the c Personal Property Tax due June 30. 	current year Intangible
	g. Name and Address of C		100	10. Name and Address of New Registere	
WH	HIGHAM, DWIGHT A		B1 Name		
	7 DEAN STREET		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
FT	MYERS FL 33901		63		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508. Florida Statu	tes, the above-named co		
		0		resident outstand and blatement for the purpose	
office or r agent. I a	registered agent, or both, in the im familiar with, and accept the i	State of Florida. Such change was obligations of, Section 607.0505, Fl	authorized by the corpora orida Statules.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	ppointment as registered
office or r agent. I a SIGNATURE	m familiar with, and accept the i	obligations of, Section 607.0505, FI	orida Statules.		opointment as registered
agent. I a SIGNATURE	Im familiar with, and accept the o	obligations of, Section 607.0505, FI	orida Statules. E: Registered Agent signature requ	uvred when reinstatling) (DATE	
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agent. I a SIGNATURE 12. TITLE	Signature, typed or profited frame or register OFFICERS P MAURER, STANLEY V. 3935 HARMONY DRIVE	obligations of, Section 607.0505, FI and agent and thin if applicable (NOT S AND DIRECTORS	orida Statules. F. Registered Agent signalure requ 13. 1.1 TITLE	uvred when reinstatling) (DATE	ND DIRECTORS IN 12
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14. Thereby 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 change, or on an attachment with an address.

San V Marin Stanley

QUA 1.94-8825

Feb 16 1998 8:00am