

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortvum
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # 177516

(2)

95 JAN 13 AM 10:11

1. Corporation Name
SWIM 'N' SPORT SHOPS INC

Principal Place of Business

Mailing Address

2396 N W 96 AVENUE
MIAMI FL 33172

2396 N W 96 AVENUE
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

02/25/1954

04/06/1994

4. FEI Number

59-0717632

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

Trust Fund Contribution



8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes



Yes

No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SIDLE, MERLE
2396 NW 96TH AVE
MIAMI, FL
33172

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:

Signature required for period reports of registered agent and the filing office

NOTE: Registered Agent signature required when registering

(ATTN)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD
SIDLE, MARK
2396 NW 96 AVE
MIAMI, FL 0

11 TITLE

Change Addition

NAME

SIDLE, MARK

12 NAME

STREET ADDRESS

2396 NW 96 AVE

13 STREET ADDRESS

CITY, ST, ZIP

MIAMI, FL 0

14 CITY, ST, ZIP

TITLE

D
SIDLE, ROSALIE
2396 NW 96 AVE
MIAMI, FL 0

21 TITLE

Change Addition

NAME

SIDLE, ROSALIE

22 NAME

STREET ADDRESS

2396 NW 96 AVE

23 STREET ADDRESS

CITY, ST, ZIP

MIAMI, FL 0

24 CITY, ST, ZIP

TITLE

CD
SIDLE, MERLE
2396 NW 96 AVE
MIAMI, FL 0

31 TITLE

Change Addition

NAME

SIDLE, MERLE

32 NAME

STREET ADDRESS

2396 NW 96 AVE

33 STREET ADDRESS

CITY, ST, ZIP

MIAMI, FL 0

34 CITY, ST, ZIP

TITLE

VTD
RUHL, ROBERT
2396 NW 96 AVE
MIAMI, FL 0

41 TITLE

Change Addition

NAME

RUHL, ROBERT

42 NAME

STREET ADDRESS

2396 NW 96 AVE

43 STREET ADDRESS

CITY, ST, ZIP

MIAMI, FL 0

44 CITY, ST, ZIP

TITLE

SD
RUHL, MARCIA J.
2396 N.W. 96TH AVE.
MIAMI FL

51 TITLE

Change Addition

NAME

RUHL, MARCIA J.

52 NAME

STREET ADDRESS

2396 N.W. 96TH AVE.

53 STREET ADDRESS

CITY, ST, ZIP

MIAMI FL

54 CITY, ST, ZIP

TITLE

NAME

61 TITLE

Change Addition

STREET ADDRESS

62 STREET ADDRESS

CITY, ST, ZIP

64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 (07C)(8), Florida Statutes. I further certify that the information indicated on this annual report as 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 its officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this document, or on an attached sheet with my address.

SIGNATURE:

Robert A. Ruhl

ROBERT A. RUHL

1/9/95

705 503 5071

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Telephone #