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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

Mar 14 1997 8:00am

Secretary of State

DOCUMENT # 423602

I am an officer or director of the corpo-appears in Block 12 or Block 13 if chair

MOLESTER SPORT FISHING & YACHTING, INC.

Principal Place of Business 6225 SW 147TH TERRACE MIAMI FL 33158		Mailing Address 6225 SW 147TH TERR, MIAMI FL 33159-1844					
US		US		3. Date Incorporated or Qualified 04/18/1973	3a. Date o		eport
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	1 00/00/		oplied For
21		[26]		59-1460116	Not Applicable		
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$		Additional
City & State		27				Fee Re	quired
23		City & State		6. Election Campaign Financing			May Be
Zip	Country	7 <sub>(p)</sub>	Country	Trust Fund Contribution		Added t	
24	25	29	30	This corporation has liability for Florida Statutes	Yes N	under 5. a	199.032,
	9. Name and Address of Curr		1201	10. Name and Address of New R			
622	DAS, JOAN H. 5 SW 147TH TERR. MI FL 33158		<ul> <li>81 Name</li> <li>82 Street Addi</li> <li>83</li> <li>84 City</li> </ul>	ress (P.O. Box Number is Not Accepta	FL 85	5 Zip (	Code
SIGNATURE	Signature, typed or punited name of registered a	gations of, Section 607,0505, Fi	t Trepistered Agent signature requi	poration submits this statement for the lion's board of directors. I hereby acceled the residual of the statement for the ADDITIONS/CHANGES TO OFFI	DATE		
TITLE	P	DELETE	1.1 TITLE	TIDD!!!ONOJO!!!!!!		Change	Addition
NAME	DUDAS, JOHN B.		1.2 NAME		_		
STREET ADDRESS	6225 SW 147TH TER.		1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CHIY+SI+2IP				
TITLE	ST	□ OFFEE	2 1 TITLE			Change	Addition
NAME	DUDAS, JOAN H.		2.2 NAML				
STREET ADDRESS	6225 SW 147TH TRR		2.3 STPLET ADDRESS				
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2 4 CHY-S1-7IP				<del></del>
NAME			3 1 1111		LJ	Change	Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. C(1Y+S1+Z(P)				
TITLE		DELETE	41 11118		П	Change	Addition
NAME			4. 2 NAME			<b>-</b>	
STREET ADDRESS			4.3 STREET ADDRESS				-
CITY-ST-ZIP			4.4 CITY - ST - ZIP				
TITLE		DELETE	5.1 10 cE	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				İ
CITY-ST-ZIP			5.4 O(1Y+ST+7/P)				
TITLE		☐ DELETE	61 THEE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			G.3 STREET ADORESS				
חול דיו עדות							

14. I do 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 eath; that I am an officer or director of the corporation or the receiver or trustee employed to execute this report as required by Chapter 607, Florida Statutes; and that my pame