2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

FILED DOCUMENT # 562902 Apr 04, 2000 8:00 am Secretary of State MARLO CHARTER YACHTS & SALES, INC. 04-04-2000 90042 045 ***150.00 Mailing Address Principal Place of Business 2318 NE 28TH STREET 2318 NE 28TH STREET LIGHTHOUSE POINT FL 33064 LIGHTHOUSE POINT FL 33064-8236 632700 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1808919 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TASSI, LOUIS A Street Address (P.O. Box Number is Not Acceptable) 2318 NE 28TH ST LIGHTHOUSE POINT FL 33064 Zip Code City FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Change ☐ Addition **VS** ☐ Delete TITLE TITLE TASSI, MARLENE E NAME NAME STREET ADDRESS STREET ADDRESS 2318 NE 28TH ST. CITY-ST-ZIP CITY-ST-7IP LIGHTHOUSE PT. FL Change ☐ Addition TITLE TITLE ☐ Delete TASSI, LOUIS A NAME NAME STREET ADDRESS STREET ADDRESS 2318 NE 28TH ST. CITY-ST-ZIP CITY-ST-ZIP LIGHTHOUSE PT. FL Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.