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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # 564950

(4)

FISHERMAN'S WHARF OF POMPANO BEACH, INC.

Principal Place of Business

Mailing Address

FILED Mar 10 1997 8:00am Secretary of State



POMPANO BE/) BEACH BOULEVARD ACH FL 33062		222 POMPANO BEACH BOULEVARD POMPANO BEACH FL 33082-5100						
						Date Incorporated or Qualified 12/29/1977		ite of Last R 19/1996	eporl
2. Principal P	lace of Business	2a. Mailing Addr	ress			4. FEI Number		Ap	plied For
11		26				59-1788083		No	ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #	, elc.			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & Stat	te	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
<i>Z</i> ip 4	Country 25	Zip 29	30	Country	′	8. This corporation has fiability for Florida Statutes	otangible Yes		199.032,
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistered /	Agent	
HER	rman kutun			81	Name				
	POMPANO BCH BLVD. MPANO BCH. FL 33062			82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)		***************************************
				83		, , , , , , , , , , , , , , , , , , ,			
				84	1		FL	. [Code
office or r agont. La	to the provisions of Sections 607, registered agent, or both, in the Sam familiar with, and accept the of	late of Florida. Such char	nde was autho	orized by	v the corpori	rporation submits this statement for the pation's board of directors. I hereby acceptions	ourpose of of the app	changing it ointment as	ts registered registered
SIGNATURE	Significant Species percent name of registers	d agent and title if applicable.	(NOTE: Reg	sistered Age	ent signature req	uired when reinstating)	DATE	•	
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND		
THUE	T V	g [_]	CLETC					Change	Addition
		Land D	FLEIL	1 1 TITLE	+			CHAING	
	KASDEN, PAUL	<u></u> .		12 NAME				change	
NAME.	3215 KAREN DRIVE	Learner 12			r address			Citalife	
NAME STREET ADORESS	3215 KAREN DRIVE DEL RAY BEACH FL			12 NAME	- 1				
AAME STREET ADORESS CHTY - ST - ZIP	3215 KAREN DRIVE DEL RAY BEACH FL S			12 NAME 13 STREET	- 1			Change	
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on or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name d. pr on an attachment with an address