

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

FILED  
Apr 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 564950 (4)  
1. Corporation Name  
FISHERMAN'S WHARF OF POMPANO BEACH, INC.



Principal Place of Business Mailing Address  
222 POMPANO BEACH BOULEVARD 222 POMPANO BEACH BOULEVARD  
POMPANO BEACH FL 33062 POMPANO BEACH FL 33062

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt #, etc.		26 Suite, Apt #, etc.		12/29/1977	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1788083	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired	
				8.75 Additional Fee Required	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	
				Yes No	

9. Name and Address of Current Registered Agent

HERMAN KUTUN  
222 POMPANO BCH BLVD.  
POMPANO BCH. FL 33062

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	V	DELETE		1.1 TITLE	Change	Addition	
NAME	KASDEN, PAUL			1.2 NAME			
STREET ADDRESS	3215 KAREN DRIVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	DEL RAY BEACH FL V.P.			1.4 CITY-ST-ZIP			
TITLE	-S	DELETE		2.1 TITLE	Change	Addition	
NAME	ROSENBERG, CARL			2.2 NAME			
STREET ADDRESS	222 POMPANO BCH BLVD			2.3 STREET ADDRESS			
CITY-ST-ZIP	POMPANO BCH, FL-00000 Pres.			2.4 CITY-ST-ZIP			
TITLE	RD-33062	DELETE		3.1 TITLE	Change	Addition	
NAME	KUTUN, HERMAN			3.2 NAME			
STREET ADDRESS	222 POMPANO BCH BLVD.			3.3 STREET ADDRESS			
CITY-ST-ZIP	POMPANO BCH. FL Deceased			3.4 CITY-ST-ZIP			
TITLE		DELETE		4.1 TITLE	Change	Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		DELETE		5.1 TITLE	Change	Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		DELETE		6.1 TITLE	Change	Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. 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 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 changed, or on an attachment with an address.

CR2E034 (10/97)

3/24/98 934-943-1488