

FILE NOW: FILING FEE IS \$61.25

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**Mar 06 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 758392 (5)

1. Corporation Name

OCEAN ISLES FISHING VILLAGE, INC.



Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified	
10877 OVERSEAS HWY UNIT 1 MARATHON FL 33052 US		10877 OVERSEAS HWY UNIT 1 MARATHON FL 33052 US		05/18/1981	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		59-2272186	
22 City & State		27 City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23 Zip Country		28 Zip Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24		25		29	
26		27		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
MEHLHAFF, FREDRICK D 10877 OVERSEAS HWY UNIT 1 MARATHON FL 33050				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 617.0502 and 617.1508, 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 617.0503, 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	VD	☒ DELETE	1.1 TITLE	VD	☐ Change ☒ Addition
NAME	KURTH, ROBERT		1.2 NAME	Peter, Larry	
STREET ADDRESS	6089 NW 27TH ST		1.3 STREET ADDRESS	1996 Overseas Hwy #23	
CITY-ST-ZIP	MARGATE FL		1.4 CITY-ST-ZIP	Marathon, FL 33050	☒ Change ☐ Addition
TITLE	SD	☐ DELETE	2.1 TITLE		
NAME	SALAVARRIA, JOSE		2.2 NAME	Title: President/Director	
STREET ADDRESS	10814 S.W. 74TH ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	VD	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GARCIA, CARLOS		3.2 NAME		
STREET ADDRESS	7300 SW 115TH ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP		
TITLE	PD	☒ DELETE	4.1 TITLE	Secretary/Director	☐ Change ☒ Addition
NAME	RAMIREZ, FRED		4.2 NAME	Mestre, Octavio E.	
STREET ADDRESS	7225 SW 16TH ST		4.3 STREET ADDRESS	7101 SW 112 Place	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	Miami, FL 33173	
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	COOK, JEANNE		5.2 NAME		
STREET ADDRESS	277 N. SACKETT ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MARBLEHEAD OH		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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jeanne Cook, TD

Jeanne Cook

2/6/98

305/743-5571

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