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

Feb 18 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (0)F20848 DONHAUSER'S YACHT BROKERAGE, INC. Principal Place of Business Mailing Address 3700 N.E. 23RD AVE. 3700 N.E. 23RD AVE. LIGHTHOUSE PT. FL 33064 DO NOT WRITE IN THIS SPACE LIGHTHOUSE PT. FL 33064 3. Date Incorporated or Qualified 02/23/1981 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2085301 Mot Applicable Suite, Apt #. etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible □ No Personal Property Tax due June 30. Yes Yes 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DONHAUSER, MARILYN 3700 N.E. 23RD AVE. Street Address (P.O. Box Number is Not Acceptable) LIGHTHOUSE POINT, FL 83 LIGHTHOUSE PT. FL 33064 84 City 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 (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TITLE 1.1 TITLE Donhauser, Marityn 3700 n.E. 23Rd Ave NAME DONHAUSER, MARILYN 1.2 NAME 3142 NORTH FEDERAL HWY STREET ADDRESS 1.3 STREET ADDRESS Lighthouse Pt. 7/ 33064 LIGHTHOUSE PT. FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE 2 1 TITLE Addition STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP Addition DELETE Change TITLE 3 1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITL€ NAME 5 2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIF 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

> 6 3 STREET ADDRESS 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 path; 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

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Block 12 or Block 13 if changed, or on an attachment with an address Mariles M.

2-12-98

FILED

954-946-9484