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

STREET ADDRESS

SIGNATURE:

FILED Apr 15 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)F54337 FRANK SOPER YACHT BROKERAGE, INC. Principal Place of Business Mailing Address C/O FRANK SOPER C/O FRANK SOPER 2317 SE 14 ST 2317 SE 14 ST POMPANO BOH FL 33062 POMPANO BCH FL 33062 DO NOT WRITE IN THIS SPACE 3 Date Incorporated or Qualified 11/24/1981 2. Principal Place of Business 2a. Mailing Address Applied For 59-2136879 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zıp Country This corporation owes or has paid the current year Intangible 30 Yes Yes 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SOPER, FRANK 2317 SE 14 ST Street Address (P.O. Box Number is Not Acceptable) 82 POMPANO BCH FL 33062 83 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 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 __ DELETE Change TITLE 1.1 TITLE SOPER, FRANK 1.2 NAME CR2E034 NAME 2317 SE 14 ST 1.3 STREET ADDRESS STREET ADDRESS POMPANO FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREE! ADDRESS 4.3 STREET ADDRESS City-St-ZiP 4.4 CITY - ST-ZIP DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP 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 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 charged, of on an attachment with an address.