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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## POCUMENT # F93000004822 (3)

## **ENJOY YACHTING CORPORATION**

Principal Place of Business
ONE LAS OLAS CIR.
SUITE 1013
FT. LAUDERDALE FL 33316

Mailing Address

## **FILED** Apr 29 1997 8:00am Secretary of State



ONE LAS OLAS CIR. SUITE 1013 FT. LAUDERDALE FL 33316		ONE LAS OLAS CIR. SUITE 1013 FT. LAUDERDALE FL 33316-1637		3. Date Incorporated or Qualified 10/22/1993	3a. Date of Last 05/01/1996		
2. Principal P	lace of Business	2a. Mailing Address				····	
····	lace of Business	<u>├</u> ``		4. FEI Number	<del>+</del>	Applied For	
21 Suite, Apt.	# 010	Suite Apt # etc			65-0236521		Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be			
Zip	Country	Zip Country		Trust Fund Contribution			
24 25		29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes No		
24	9. Name and Address of Curren	1 Registered Agent	1301	<del>-</del>			
VAL	IM, TEVFIK	it togictore rigoti		10. Name and Address of New Registered Agent  81 Name			
	LAS OLAS CIR.		l				
SUN	TE 1013			82 Street Add	dress (P.O. Box Number is Not Acceptabl	e)	
FT. I	LAUDERDALE FL 33316			83			
			- 1	84 City		#-F	Code
11. Pursuant office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statu e of Florida. Such change was ations of, Section 607.0505, F	ites, the ab authorized lorida Stati	ove-named cor by the corpora ites.	poration submits this statement for the putition's board of directors. I hereby accept	rpose of changing the appointment a	its registered s registered
SIGNATURE	Signature, typed or printed name of registered age	est and tille if applicable. (NO	If : Registered	Agent signature requ	ired when reinslating)	DATE	<del></del>
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		RS IN 12
TITLE	PVD	☐ DELETE	DELETE 1.1 TILE			Change	Addition
NAME YAUM, TEVFIK			1.2 NAME				
STREET ADDRESS ONE LAS OLAS CIR., #1013			1.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY - ST - ZIP				
TITLE	SID	DELETE	2.1 TIT			Change	Addition
NAME YALIM, NECLA			2.2 NAME				
STREET ADDRESS ONE LAS OLAS CIR., #1013			2.3 STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33316			1Y - \$1 - 7IP			
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NAME		_	3.2 NA				
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CITY-ST-ZIP				Y-SI-ZIP			
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NAME		that revert	4. 2 NA			L_1 Grange	- Notified
STREET ADDRESS							
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		L priiit		I .		Change	L Addition
NAME STREET ADDOCCO			5.2 NA	I .			
STREET ADDRESS				REET ADDRESS	•		İ
CITY-ST-ZIP		Desert		Y - ST - ZIP		——————————————————————————————————————	
TITLE	* .	☐ DELETE	6.1 111	I .		Change	L_ Addition
NAME	•		6.2 NA	1			
STREET ADDRESS	$t_{j}$		6.3 STF	EET ADDRESS			
CITY-ST-ZIP			6.4 CI1	Y-\$1-ZIP			

I do 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 eath; 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