Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90036 015 ***158.75

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

· PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # E0700004025

i. Corporado	DLIO MANAGEMENT OF NEV							
Principal Place	e of Business	Mailing Address			, 18 111 18 811 8 81 ,			1(10) 014 1001
2957 STATE ROAD 84 FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312			2		<u>.</u>			
FORT CAUDERL	JALE PL 33312	FORT LAUDERDALE FL 3331	2		DO NOT	WRITE IN THIS	SPACE	
				3. Date Incorpora 07/31/1997		ifed		
3 Bringing D	Place of Business	2a, Mailing Address		4. FEI Number			Apr	plied For
	lace of business	⊢ , •		33-0330320	i :			t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.	··· ·				\$8.75 A	
22	· #, 0.0.	27		5. Certifcate of S	atus Desire	d 🗆	Fee Red	
City & Stat	te	City & State		6. Election Camp	aign Financ	ing -	\$5.00	May Be
23		28		Trust Fund Co		"" ⁹	Added to	
Zip	Country	Zip	Country	8. This corporation		current year Inta	angible	_/
24	25	29	30	Personal Prop		,		☑ No
	9. Name and Address of Curren	t Registered Agent		10. Name and Ad	dress of Ne	w Registered	Agent	
001	HEV OTHE D		81 Name	Gene R. C	CONLE	4		
	NLEY, GENE R		ddress (P.O. Box Numbe	r is Not Acc	eptable)	# 200		
% Westport Yacht Sales, Inc. 2957 State Road 84			15	1751 SHERI	DAN	STREET	700	<u> </u>
	T LAUDERDALE FL 33312		83		1			
run	II LAUDENDALE PL 33312		84 City		1	FL	85 Zip C	ode
,			FT.	LANberbale	atomont for		changing its	331
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State	nt Florida. Such change was au	tnorized by the corbor	ation's board of directors	.'I hereby a	ccept the appoir	milioni as reg	A.C.C.
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Plori	da Statutes		1	سم و	so A	Re
SIGNATURE	Signature, typed or printed name of registered agen	NLEY Y	Registered Agent signature red	guid when reinstating)		DATE	_7.Y	`
12.	OFFICERS AN		13.	ADDITIONS/CH	ANGES TO	OFFICERS AN	D DIRECTO	RS IN 12
TITLE	CP	☐ DELETE	1.1 TITLE	CP	i t	1	Change	Addition
NAME	CONLEY, GENE R		12 NAME	Gene R. Co 15751 SHE FT. LAUDER	Ley	٠. ــ	#	
STREET ADDRESS	***** ****		1.3 STREET ADDRESS	15751 SHE	CIDAN	STREET	77 200	י פ
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		1,4 CITY-ST-ZIP	FT. LAUDER	NALO.	. FL 3	<u> 3337 </u>	
TITLE		☐ DELETE	2.1 TITLE			, 	☐ Change	☐ Addition
NAME			2.2 NAME		1	!		
STREET ADDRESS			2.3 STREET ADDRESS					(
CITY-ST-ZIP			2.4 CITY-ST-ZIP		1			
TITLE		☐ DELETE	3.1 TITLE		i	! .	☐ Change	Addition
NAME			3.2 NAME			1)		l
STREET ADDRESS			3.3 STREET ADDRESS			ı		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		•	-		
TITLE		☐ DELETE	4.1 TITLE		•	ļ	Change	Addition
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STREET ADDRESS			4.3 STREET ADDRESS		1	1		
C-TY-ST-ZIP			4 4 CITY-ST-ZIP	_	1	<u> </u>	☐ Change	Addition
TITLE					!			Addition
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NAME .		☐ DELETE	5.2 NAME] .	1	change	
NAME STREET ADDRESS		☐ DELETE	5.2 NAME 5.3 STREET ADDRESS		<u> </u>	1 1 1	Cridings	_
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STREET ADDRESS CITY-ST-ZIP			5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		. 			☐ Addition

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

954-614-7959