## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

	NOVENT# G167 ACULATE BOAT CARE, INC	79 (2 <sub>)</sub>	,	I nabaha bana mang anan kasaha	
	e of Business 12TH TERRACE EACH FL 33179	Mailing Address 233 N E 212TH TE N MIAMI BEACH FI US			
				<ol> <li>Date Incorporated or Qualified</li> <li>12/27/1982</li> </ol>	
_ <b>2</b> , Principal P <b>21</b>	lace of Business	2a. Mailing Address		4. FEI Number	04/17/1995 Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		59-2255631	Not Applicable
22		27 Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	e	City & State		6. Election Campaign Financing	Fee Required
Zip	Country	28		Trust Fund Contribution	S5.00 May Be Added to Fees
4	25]	Zip <b>29</b>	Gountry 30	8. This corporation has liability for	intangible tax under s 199.032,
	9. Name and Address of Currer	nt Registered Agent	30	Florida Statutes Yes  10. Name and Address of New F	
461.00			81 Name	TO THE PROPERTY OF THE PARTY	ushisteled Wäsut
SCHRIE	ELER, WARREN P E 212TH TERRACE		82 Street Add	dress (P.O. Box Number is Not Acceptate	nle)
	E 2121H TEHRACE N BEACH FL 33179		83		
TT TTIP AT	# DEMO[1 FE 221/8		03		
			84 City		85 Zip Code
11. Pursuant t	o the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	ites, the above-named corpo	pration submits this statement for the nur	FL 03 2.p code
11. Pursuant t or register familiar wit	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Sect	2 and 607.1508, Florida Statu da. Such change was authori lion 607.0506, Florida Statute	ites, the above-named corporation's boats.	oration submits this statement for the pur ard of directors. I hereby accept the app	rpose of changing its registered office ointment as registered agent. I am
SIGNATURE	and descript the disligations of, Sect	lion 607.0505, Florida Statute	s.	то в предостивного по в предостивного предостивного по в предостивного по по в предостивного по в предостивного по	pose of changing its registered office ointment as registered agent. I am
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SIGNATURE: MANUAL P.

OPPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/96 (305)653-2494