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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name G19940

(7)

BAY SHORE YACHTS, INC.

FILED Apr 09 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | E NEBINII ORBI IJONO JUNIO JUNIO 84ENA O | | JABIA BIBIA BABA | |
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| 1001 SEAFAR SUITE 101 JUPITER FL 3 | | 1001 SEFARER CIR. SUITE 101 JUPITER FL 33477 | | | | DO NOT WRITE IN THIS SPACE | | | |
| US | US | | | | 3. Date Incorporated or Qualified | | | | |
| | | | | | | 01/24/1983 | | | |
| ···· | ace of Business | 2a. Mailing Address | | | | 4. FEI Number | | — | plied For |
| 21 | | 26 | | | | 59-2295379 | | | t Applicable |
| Suite, Apt. #, etc. 22 | | Suite, Apt. #, etc. | 27 | | | 5. Certificate of Status Desired | | \$8.75 A Fee Re | quired |
| City & State | | City & State | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution | | | |
| Zip | Country | Country Zip Co | | ry | 8. This corporation owes or has paid the current year Intangible | | | _ ~ | |
| 24 | 25] | 29 30 | | | Personal Property Tax due June 30. Yes No | | | J No | |
| | g, Name and Address of Currer | | 10. Name and Address of New Registered Agent | | | | | | |
| | ras, John H., II | | ľ | 81 Name | | | | | |
| |)1 SEAFARER CIR. | | 82 Street Add | | | s (P.O. Box Number is Not Accepta | ible) | | |
| | ITE 101 | | 83 | | | | | | |
| JUI | PITER FL 33477 | | * | ا" | | | | | |
| | | | | 4 City | | | FL | 85 Zip C | |
| 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, bysed or presided name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | | | | |
| 12. | | D DIRECTORS | 13. | | ········ | ADDITIONS/CHANGES TO OFF | ICERS AND | DIRECTOR | S IN 12 |
| TITLE | DP DELETE 1.1 T | | 1.1 TITL | : | | | | Change | Addition |
| NAME | MIERAS, JOHN H II | | 1.2 NAM | E | | | | | |
| STREET ADDRESS | 1001 SEAFARER CIR., SUITE | 101 | 1.3 STREE | | 3 | | | | |
| CITY-ST-ZIP | JUPITER FL | | 1.4 CITY-ST-ZIP | | | | | | |
| TITLE | DELETE 2.1 T | | 2.1 TITE | | | | | Change | Addition |
| NAME | 2.20 | | 2.2 NAM | E | | | | | |
| STREET ADDRESS | 2 | | 2.3 STRI | 2.3 STREET ADDRESS | | | | | İ |
| CITY-ST-ZIP | | | _ | -ST-ZIP | | | | T | |
| TITLE | DELETE 3.5 | | 3.1 TITL | | | • | | Change | Addition |
| NAME | | | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | | ET ADDRESS | § | | | | |
| CITY-ST-ZIP | | | | r-ST-ZIP | - | | | Change | Addition |
| TITLE | | | 4.1 TITL | | 1 | | | rm Augusta | Addition |
| NAME | | | 4. 2 NA | | . | | | | |
| STREET ADDRESS | B Commence of the Commence of | | - 6 | ET ADDRESS | ` | | | | |
| CITY-ST-ZIP | | DELETE | | -ST-ZIP | + | | | Change | Addition |
| TITLE | | L. Dittit | 5.1 TITL 5.2 NAM | | 1 | | | onlingo | |
| NAME CORECT ADORESCE | | | 1 | | | | | | 1 |
| STREET ADDRESS | | | | ET ADDRESS | ` | | | | |
| CITY-ST-ZIP TITLE | | | | CITY-ST-ZIP | | | | Change | Addition |
| NAME | | | 6.2 NAM | | | | | | |
| STREET ADDRESS | | | | ET ADDRESS | . | | | | |
| | | | | -ST-ZIP | ' | | | | |
| CITY-ST-ZIP | certify that the information supplied y | ith this filing does not qualify f | | | ated in Se | ection 119 07(3)(i) Florida Statutes | Lifurther ce | rtify that the | information |

indicated on this annual report or supplier will this limit does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Interfer certify that the informatic indicated on this annual report or supplemental annual report is true and eccurate 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 receivor 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 changing, or on an attachment with an address.

561-371-3717