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 # **G62428**

1. Corporation Name

PARAMOUNT POWERBOATS INC.

Principal Place of Business	
% DARRYL ROSS CHANCEY 1986 TIGERTAIL BLVD. S-9 DANIA FL 33004	
2. Principal Place of Business	

Mailing Address

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90012 036 ***150.00



% DARRYL ROSS CHANCEY 1986 TIGERTAIL BLVD. S-9 DANIA FL 33004 % DARRYL ROSS CHANCEY 1986 TIGERTAIL BLVD. S-9 DANIA FL 33004							DO NOT WRITE IN THE 3. Date Incorporated or Qualifed 09/12/1983	S SPACE_		
Principal Place of Business 2a. Mailing Address							4. FEI Number		Applied For	
21 26						59-2319612		Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.						- 0 111 1 101-1-1	\$8.75	Additional		
22 27 27				5. Certifcate of Status Desired.			Fee	Required		
City & State City & State						6. Election Campaign Financing	\$5.0	0 May Be		
23							Trust Fund Contribution	Adde	d to Fees	
Zip				Countr	 У		8. This corporation owes the current year I	ntangible		
24 25 29 30				0	Personal Property Tax. Yes No					
_	9. Name and Address of Curre	nt Regis	stered Agent		10. Name and Address of New Registered Agent					
				81	81 Name					
	NCEY, LISA B.			9	82 Street Address (P.O. Box Number is Not Acceptable)					
1986	TIGERTAIL RD			"	52 Street Address (P.O. Box Number is Not Acceptable)					
S-9				83	3					
DANIA FL 33004				<u> </u>	1			11		
! 				84	1	City	F	∎ 85 Zi	p Code	
44 Durewant	to the provisions of Sections 607.050	2 and f	307 1508 Florida Statutes	the above	/e-	named corno	ration submits this statement for the purpose	of changing	its registered	
office or ri	egistered agent or both in the State	of Flori	ida. Such change was aut	horized by	v tr	ne corporation	n's board of directors. I hereby accept the app	ointment as	registered	
agent. I a	m familiar with, and accept the obliga	tions of	f, Section 607.0505, Floric	ia Statute	S.					
SIGNATURE		A 4 AW-	W	and a second second		signature required	when reinstating) DATE			
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered OFFICERS AND DIRECTORS 13.					signature required	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	TORS IN 12	
TITLE	DP	U DIN	☐ DELETE	1.1 TITLE	-		ABBITIONO/OFFICE TO OFFICE NO.	☐ Chang		
	CHANCEY, DARRYL ROSS		<u></u>	1.2 NAME					_	
NAME	1986 TIGERAIL BLVD					DBOEGG				
STREET ADDRESS				1.3 STREE					l	
CITY-ST-ZIP	DANIA, FL 00000 V		DELETE	1.4 CITY-1	SI-	ZIP		Chang	e Addition	
TITLE	· •		C) DELETE	2.1 TITLE				onang		
NAME	CHANCEY, LISA BERMAN					[
STREET ADDRESS	1986 TIGERTAIL BLVD.			23 STREE		i			1	
CITY-ST-ZIP ~	-Dania FL			2:4 CfTY-	ST-	ZIP —		Chang	e Addition	
TITLE			☐ DELETE	3.1 TITLE		Ì		Chang	B	
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE	ET A	NODRESS				
CITY-ST-ZIP				3.4. CITY-	ST-	ZIP				
TITLE			OELETE	4.1 TITLE]		Chang	e 🗌 Addition	
NAME				4, 2 NAME	Ξ				1	
STREET ADDRESS				4.3 STREE	ET A	ADDRESS			Ì	
CiTY-ST-ZIP				4.4 CiTY-	ST-	ZIP				
TITLE			☐ DELETE	5.1 TITLE				Chang	e	
NAME				5.2 NAME					j	
STREET ADDRESS				5.3 STREE	EΤΑ	NDORESS			}	
CITY-ST-ZIP				5.4 CITY-	ST-	ZIP			j	
TITLE			☐ DELETE	6.1 TITLE				☐ Chang	e	
NAME				6.2 NAME					ĺ	
STREET ADDRESS				6.3 STREE	ET A	NODRESS				
CITY-ST-ZIP	ı			6.4 CITY-	ST-	ZIP]	
OH FOR ALL										

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.

SIGNATURE: