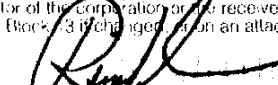


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # G66854 (2)			
1. Corporation Name TROPICAL BOAT SALES & CHARTER, INC.			
Principal Place of Business 4510 NW 36TH AVE. MIAMI FL 33142		Mailing Address 4510 NW 36TH AVE. MIAMI FL 33142-4220	
2. Principal Place of Business 21 1100 N.W. 55 Street Suite, Apt. #, etc. 22 City & State 23 Ft. Lauderdale 24 FL 33309 25 USA		2a. Mailing Address 26 1100 N.W. 55 Street Suite, Apt. #, etc. 27 City & State 28 Ft. Lauderdale 29 FL 33309 30 USA	
3. Date Incorporated or Qualified 10/27/1983		3a. Date of Last Report 07/10/1996	
4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent SCHNEIDER, BRIAN 4510 NW 36 AVE MIAMI FL 33142		10. Name and Address of New Registered Agent 81 Name Brian Schneider 82 Street Address (P.O. Box Number is Not Acceptable) 1100 N.W. 55 Street 83 84 City Ft. Lauderdale FL 85 Zip Code 33309	
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  3-22-97			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
☐ DELETE		☐ Change ☐ Addition	
1.1 TITLE PS 1.2 NAME SCHNEIDER, RICHARD 1.3 STREET ADDRESS 4510 NW 36TH AVE. 1.4 CITY-ST-ZIP MIAMI FL 33142		1.1 TITLE President 1.2 NAME Richard C. Schneider 1.3 STREET ADDRESS 1100 N.W. 55 Street 1.4 CITY-ST-ZIP Ft. Lauderdale, FL. 33309	
2.1 TITLE Vice President 2.2 NAME Brian Schneider 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 33309		2.1 TITLE Vice President 2.2 NAME Brian Schneider 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 1100 N.W. 55 ST. Ft. Lauderdale, FL	
☐ DELETE		☐ Change ☐ Addition	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
14. 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 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, on an attachment with an address.			
SIGNATURE:  President		3/21/97 954-938-5111	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE DAYTIME PHONE #	

CR2E034 (9/96)