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 # G71578

(0)

BLUE CRAB KEY, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Plac	e of Rusiness	Mailing Address			8 8 8 9
, ''					
5280 BLUE CRAB CIRLCE 5280 BLUE CRAB CIRLCE BOKEELLA FL 33922 BOKEELLA FL 33922					
		501,222		DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualified	
9 Principal P	loos of Business	2s. Mailing Address		11/21/1983 4. FEI Number	- I TA
Principal Place of Business Principal Place of Business		26		1	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2516411	60 7E
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25	29 3	0]	Personal Property Tax due June 30	
	9. Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New Regis	stered Agent
Casassa, Mark a			oi Name		
1207 3 RD ST S			82 Street Addr	ress (P.O. Box Number is Not Acceptable)
SUITE 2					
NA.	PLES FL 33940		サムの	10 East Tamiami	Mrall Suite 204
			84 City	Japles	FL 85 Zip Code
44 Purcuent	to the provisions of Sactions 607 Ob	02 and 607 1508 Florida Statutes	the above named core		· · · · · · · · · · · · · · · · · · ·
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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) DATE					
12,		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PS	☐ DELETE	11 TOTLE		Change Addition
NAME	DAKOS, NICHOLAS N		1.2 NAME		
STREET ADDRESS	Marina RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOKEELIA, FL 00000		1.4 CITY-ST-28P		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREFT ADDRESS		
CITY-ST-ZIP			2.4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Profess	3.4. CITY - ST - ZIP		Change
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		}
CITY-ST-ZIP TITLE		☐ DEL E TE	4.4 CITY-ST-ZIP 5 1 TITLE		Change Addition
		E) profit	5.2 NAME		C Sumings C Russiani
NAME Street address			5.3 STREET ADDRESS		
		1	5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TRLE		Change Addition
NAME			6.2 NAME		<u> </u>
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	sertify that the information supplied y	with this filing does not qualify for		Section 119 07(3)(i) Florida Statutes I fui	ther 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.

4/21/98