PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 15, 1999 8:00 am Secretary of State

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1. Corporation Name

TARPON RIVER BOAT SHOP, INC.

Principal Place of Business Mailing Address										
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US 3. Date Incorporated or Qualified SQ2211885 Sq25211885 Sq25221885 Sq252221885	SUITE 4 SUITE 4		BLVD			DO NOT WRITE IN THI	S SPACE			
Suite, Apt. #, etc.							3. Date Incorporated or Qualifed			
Suite, Apt. #, etc. Suite, Apt. #, etc.	2. Principal P	ace of Business	2a. Mailing Address							‡=
City & State Personal Property Tax. Personal Property Tax. In a Franch Compality Financing Added to Frees Added to Frees Personal Property Tax. In a Franch Compality Financing State Address of New Registered Agent TARAN, LARRY 102 NN SPANISH RIVER BLVD SUITE 4 BOCA RATION FL 33431 BOCA RATION FL Majorited Agent of other City FL Signature agent. I am familiar with, and accept the obligations of Section 607 (505). Florida Statutes. SIGNATURE	21	<u> </u>					59-2562247			7
Zip Country Zip Zi	Suite, Apt.	#, etc.	_ <u> </u>				5. Certificate of Status Desired	Fee F	Required	
Zip Country Zip Country Zip Country S. This corporation ower the current year Integrable Personal Property Tax. Yes EMO	City & State	e	— `				1 * 11	•	•	
9, Name and Address of Current Registered Agent TARAN, LARRY 102 NW SPANISH RIVER BLVD SUITE 4 BOCA RATON FL 33431 82 Street Address (P.O. Box Number is Not Acceptable) 83 Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 507 0502 and 507 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named 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, Statute		г—¬,			intry		Personal Property Tax.	☐ Yes	₽No	
TARAN, LARRY 102 NW SPANISH RIVER BLVD SUITE 4 BOCA RATON FL 33431 4 City FL 8 Zip Code 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 agent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and frame familiar with an accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered digent special submits and accept the obligation of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered digent and accept the obligation of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered digent and purpose of changing its registered digent and purpose accept the appointment as registered agent and obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered		9. Name and Address of Curre	ent Registered Agent		<u>L., </u>		10. Name and Address of New Registered	l Agent	 	-
102 NW SPANISH RIVER BLVD SUITE 4 BOCA RATON FL 33431 82 Street Address (P.O. Box Number is Not Acceptable) 83 Bd City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. When the provisions of Sections 607.0502 and 607.1508, Florida Statutes. When the provisions of Sections 607.0502 and 607.1508, Florida Statutes. When the provisions of Sections 607.0502 and 607.1508, Florida Statutes. When the provisions of Sections 607.0502 and 607.1508, Florida Statutes. SIGNATURE SIGNATURE Signature, lyader princip of impact of impactive dispert and disp if applicable. More reported on Statutes. When the provisions of directors. I hereby accept the application of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS IN 12. 14. CITY. ST. ZIP 15. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS IN 12. 22. NAME 23. STREET ADDRESS CITY. ST. ZIP 14. CITY. ST. ZIP 14. CITY. ST. ZIP 14. CITY. ST. ZIP 15. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS IN 12. 22. NAME 23. STREET ADDRESS CITY. ST. ZIP 14. CITY. ST. ZIP 15. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS IN 12. 22. NAME 23. STREET ADDRESS CITY. ST. ZIP 14. CITY. ST. ZIP 15. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS IN 12. 22. NAME 23. STREET ADDRESS CITY. ST. ZIP 14. CITY. ST. ZIP 15. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS IN 12. 25. NAME 25. NAME 25. STREET ADDRESS CITY. ST. ZIP 16. CITY. ST. ZIP 17. CITY					81	Name				}
BOCA RATON FL 33431 B4 City FL 55 Zip Code 11. Pursuant to the provisions of Sections 507.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12.				82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES.TO OFFICERS AND DIRECTORS.IN.12. 14. DP TARAN, LARRY 15. MARINE WAY \$3 15. STREET ADDRESS DELRAY BEACH FL 16. DELETE 17. TITLE 16. DELETE 17. TITLE 18. DELETE 18. DELETE 19. TITLE 19. DELETE 21. TITLE 22. YAMAE 22. YAMAE 22. YAMAE 23. STREET ADDRESS DELRAY BEACH FL 14. TITLE 15. TITLE 16. DELETE 21. TITLE 23. STREET ADDRESS CITY-ST-ZP 17. ST-ZP 17. ST-					83					1
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, a minimum or registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, type or printed nume or registered agent and size it specialises. NOTE: Registered Agent algorithmen registered when reinstation; OFFICERS AND DIRECTORS, IN.12. 12. OFFICERS AND DIRECTORS. 13. ADDITIONS/CHANGES.TO OFFICERS: AND.DIRECTORS, IN.12. 11. TITLE OP. TARAN, LARRY 12. WARE 12. WARE 13. STREET ADDRESS. CITY-ST-ZP DELRAY BEACH FL 14. CITY-ST-ZP DELRAY BEACH FL OBELETE 14. CITY-ST-ZP OPLICATION OFFICERS AND DIRECTORS. 15. MARINE WAY #3 DELRAY BEACH FL OBELETE 31. TITLE OBELETE 31. ADDITIONS/CHANGES.TO OFFICERS: AND.DIRECTORS, IN.12. 22. WARE 23. STREET ADDRESS. CITY-ST-ZP OR CHANGE AGRICULT OFFICERS AND DIRECTORS. 34. CITY-ST-ZP OR CHANGE AGRICULT OFFICERS AND DIRECTORS. 34. CITY-ST-ZP OR CHANGE AGRICULT OFFICERS AND DIRECTORS. 35. STREET ADDRESS. CITY-ST-ZP OR CHANGE AGRICULT OFFICERS AND DIRECTORS. 36. CITY-ST-ZP OR CHANGE AGRICULT OFFICERS AGRICULT	BOC	CA RATON FL 33431			94	City	·	es 7ir	n Code	┨
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent, or both, and accept the obligations of, Section 607 0505, Florida's Statutes. SIGNATURE 12						•				
Signature, typed or printed name of regulated agent and othe if applicable. (NOTE: Registered Agent resputue ships non-instituting). Unit	office or r agent. I a	egistered agent, or both, in the State	e of Florida. Such change was	s authorized	o by th	named corpo ne corporatio	oration submits this statement for the purpose c on's board of directors. I hereby accept the appo	i changing if	ts registered registered	
TARAN, LARRY	SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NC	TE: Registered	Agent s	signature required	,			4
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CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP