Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90096 030 ***150.00

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

DOCU	MENT # J32506				
 Corporation 	Name				
YACHT I	NTERIORS, INC.			L COMES IN THE COLOR HIND RIGH STORE STATE	
Principal Place	of Business	Mailing Address			Oldiy Byerl oldil grafil olbil şedi
1681 11TH STR		1681 11TH STREET			
SARASOTA FL		SARASOTA FL 34236		DO MOT WRITE IN THE	0.00405
บร		US		DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualifed 09/10/1986	ļ
2 Deinsteal D	and of Dunings	2a. Mailing Address		4. FEI Number	Applied For
·	ace of Business	26. Walling Address		59-2834286	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.		_	\$8.75 Additional
22	, 00.	27		5. Certificate of Status Desired	Fee Required
City & State	9	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 the current year In	
24	25	29 30		Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent	Od Name o	10. Name and Address of New Registered	I Agent
BLACKWELDER, BEFKE D NAME - address 81 Name BE					(-
442 CLEVELAND DRIVE C (A C A C A			82 Street A	Address (P.O. Box Number is Not Acceptable)	Deive
442 CLEVELAND DRIVE Change - SARASOTA FL 33577 Same agants			83 5 2	06 INVERNESS	DELO &
) OAR	501	me agants	63		
			84 City	masota F	85 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 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 a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes.		
SIGNATURE	Signature, typed or printed name of registered agent	and title if englicable (NOTE: Re	gistered Agent signature re	guired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE	7 7	Change Addition
NAME	BLACKWELDER, BEFKE D		1.2 NAME	BEFRE DERING	
STREET ADDRESS	442 CLEVELAND DRIVE			520 6 INVERNESS	DRIVE
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	Sarasota, EL. 3	423634243
TITLE		☐ DELETE	2.1 TITLE	• •	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	<u> </u>	Change DAddition
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP	•	☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE		
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ OELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TITLE		المالية المالية	5.2 NAME	·	
NAME etheet annhees			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME		- ·	6.2 NAME		
STREET ANNIPESS			6.3 STREET ADDRESS		

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

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NG OFFICER OR DIRECTOR