

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

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Apr 18 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 # J42002 (2) 1. Corporation Name LAUDERDALE YACHT & SHIP, INC.			
Principal Place of Business 1609 PASADENA AVE SO SUITE 1-F ST. PETERSBURG FL 33707 US		Mailing Address 1609 PASADENA AVE SO SUITE 1-F ST. PETERSBURG FL 33707-4589 US	
2. Principal Place of Business 21 1615 PASADENA AVE SO Suite, Apt. #, etc. 22 SUITE 300 City & State 23 ST PETERSBURG, FL Zip Country 24 33707 25 USA		2a. Mailing Address 26 1615 PASADENA AVE SO Suite, Apt. #, etc. 27 SUITE 300 City & State 28 ST PETERSBURG, FL Zip Country 29 33707 30 USA	
9. Name and Address of Current Registered Agent ZANE, JEFFREY P., ESQ. 7015 BERACASA WAY, STE. 201 BOCA RATON FL 33433		3. Date Incorporated or Qualified 11/13/1986 3a. Date of Last Report 06/21/1996 4. FEI Number 59-2747374 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
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.		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
SIGNATURE: Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE P NAME BRAMLET, DEAN A. STREET ADDRESS 1609 PASADENA AVE. SO. SUITE 1-F CITY-ST-ZIP ST. PETERSBURG FL		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1615 PASADENA AVE SO, SUITE 300 1.4 CITY-ST-ZIP ST PETERSBURG, FL 33707	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 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, or on an attachment with an address.			
SIGNATURE: SIGNATURE REQUIRED		4/18/97 8133819696	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone *	



CR2E034 (9/96)