FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

APPROVED

FILED

96 MPR 26 MM 10: 53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1996

J60630 DOCUMENT # Corporation Name

(7)

PARAMOUNT YACHT BROKERS, INC.

Principal Place of Business Mailing Address 54 COREY AVENUE 54 COREY AVENUE P. O. BOX 66159 P. O. BOX 66159 ST PETERSBURG BEACH FL 33736-3159 ST PETERSBURG BEACH FL 33736-3159 3. Date Incorporated or Qualified 3a. Date of Last Report 03/04/1987 04/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2784849 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П 28 Trust Fund Contribution Added to Fees Zip Country Z_{1D} Country 8. This corporation has liability for intencible tax under s. 199,032. 24 25 20 30 Florida Statutes Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ENGLANDER, LEONARD S. Street Address (P.O. Box Number is Not Acceptable) 6666-22ND AVENUE NORTH 5959 CENTRAL AVENUE, SUITE 201 83 ST. PETERSBURG FL 33710 84 City 85 Zip Code 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, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1. 1 71716 ☐ Change Addition TAPPAN, RICHARD A. NAME 1.2 NAME 54 COREY AVE STREET ADDRESS 1.3 STREET ADDRESS ST.PETERSBURG BCH FL 300001812143 CITY-ST-ZIP 1.4 CHTY-ST-ZIP 05/07/96--01d**60--6**1&@ TITLE TT DELETE 2 1 TITLE TAPPAN, RICHARD A. 2.2 NAME **54 COREY AVE** STREET ADDRESS 2.3 STREET ADDRESS ST.PETERSBURG BCH FL CITY-ST-ZIP 2.4 City - ST - ZIP PD DELETE TITLE 3.1 TITLE ☐ Change Addition STROSS, JOHN E. NAME 3.2 NAM8 **54 COREY AVE** STREET ADDRESS 3.3 STREET ADORESS ST.PETERSBURG BCH FL CITY-ST-ZIP 3.4 CITY - ST- ZIP TITLE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP TITLE ☐ DELETE 6 1 TITLE Change

62 NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 same appears in Block 12 or Block 13 if changed, or on an attaching with an address.

6.3 STREET ADDRESS

6.4 City-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

☐ Addition