SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K2994

(4)

BOARDROOM AQUATICS, INC.

FILED
Oct 07 1998 8:00am
Secretary of State

- PROPORTIR BIO MORA TOMO JOME DIDIN JODE BIDIN DIDIN DIDIN DEDIN DEBLE DIDIN DEBLE

Principal Plac	e of Business	Mailing Address				
% RICHARD JAMES WINDELER 12795 KENWOOD LANE FT MYERS FL 33907		12795 KENWOOD LANI SUITE 4-A FT MYERS FL 33907	12795 KENWOOD LANE SUITE 4-A FT MYERS FL 33907		DO NOT WRITE IN TI	HIS SPACE
US US					3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Malling Address					08/01/1988 4. FÉI Number	Applied For
21		26		65-0063073	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	├─¬		Countr 30	ý	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
- :1	9. Name and Address of Curi				10. Name and Address of New Registers	
WINDELER, RICHARD JAMES				Name		
12795 KENWOOD LANE				Street A	ddress (P.O. Box Number is Not Acceptable)	
	'E 4- A (YER S FL 33907		83			
	TIETIE I E GOOD		84	City		85 Zip Code
SIGNATURE	Signalum, typed or printed name of registered a			Agent signature	required when reinstating) DATE ADDITIONS OF TABLE TO DESCRIBE	
12.		AND DIRECTORS	13. 1,1 TITLE		ADDITIONS/CHANGES TO OFFICERS	
NAME	DPVS DELETE WINDELER, RICHARD JAMES		1.1 TILE			Change Addition
STREET ADDRESS 12795 KENWOOD LANE, SUIT			1.3 STREET ADDRESS			
CITY-ST-ZIP	FT MYERS FL		1.4 CITY-S			
TITLE		DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			: 3
CITY-ST-ZIP TITLE			2.4 CITY-S 3.1 TITLE	T-ZIP		
NAME			3.1 TITLE	ļ		Change Addition
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			3.4 CITY-S	· · · · · · · · · · · · · · · · · · ·		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREE	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		DELETE	5.1 TITLE	ļ		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE			
CITY-ST-ZIP		DELETE	5.4 CITY-S 6.1 TITLE	1-ZIP		Change Addition
NAME		[] DELETE	6.2 NAME	1		L Change [_] Addition [

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 deceiver 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 charged, or or or an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

IGNATURE TICKE A POSTA SALVANDA SALVANDA

STREET ADDRESS

CITY-ST-ZIP

29/98 94/-275-

CR2E034 (5/98