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Jun 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K51879 (0)
1. Corporation Name
PORT COVE MAINLAND MARINA, INC.



Principal Place of Business
7891 S.W. 62ND AVE
SOUTH MIAMI FL 33143

Mailing Address
7891 S.W. 62ND AVE
SOUTH MIAMI FL 33143-4962

3. Date Incorporated or Qualified
12/16/1988

3a. Date of Last Report
05/01/1996

2. Principal Place of Business
21 1050 LUGO AVE
Suite, Apt. #, etc.
22
City & State
23 CORAL GABLES FL
Zip
24 33156
Country
25 DADE
2a. Mailing Address
26 1050 LUGO AVE
Suite, Apt. #, etc.
27
City & State
28 CORAL GABLES FL
Zip
29 33156
Country
30 DADE

4. FEI Number
65-0086983

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MARGARET MEYER
7891 S.W. 62ND AVE
SOUTH MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name
ROBERT A. KOGER
82 Street Address (P.O. Box Number is Not Acceptable)
1050 LUGO AVE
83
84 City
CORAL GABLES FL 85 Zip Code
33156

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.

SIGNATURE DATE 5/28/97

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	PST MEYER, CHARLES	7891 S.W. 62ND AVE	MIAMI FL		ROBERT A. KOGER	1050 LUGO AVE	CORAL GABLES, FLA. 33156
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	VPD MEYER, CHARLES	7891 S.W. 62ND AVE	MIAMI FL		ROBERT A. KOGER	1050 LUGO AVE	CORAL GABLES, FLA. 33156
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	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: DATE 4/28/97 308-666-1103

CH2E034 (9/96)