

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K91380**

(1)

1. Corporation Name

THE NEW RYSCO SHIPYARD, INC.



Principal Place of Business

**545 - 150TH AVE.
MADEIRA FL 33708**

Mailing Address

**545 - 150TH AVE.
MADEIRA FL 33708**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301**

3. Date Incorporated or Qualified

05/26/1989

3a. Date of Last Report

12/22/1995

4. FEI Number

59-2957846

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

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

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	REINGOLD, IRVING	
STREET ADDRESS	545 - 150TH AVE.	
CITY-STATE-ZIP	MADEIRA BEACH FL 33708	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	☐ Change ☐ Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	☐ Change ☐ Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	☐ Change ☐ Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	☐ Change ☐ Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)