**FILED** Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90099 029 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L05511

1. Corporation	, regime					í				
S & J SF	PORTS MARKETING, INC.						1 ( <b>10</b> )(11) Bit <b>15</b> (1) \$(11) Bit	II. 11 <b>88</b> 1 11 <b>8</b> 1 <b>818</b> 11	ALAKI AHAKI AHAKI A	011 01 <b>3</b> 11 1901
Principal Place of Business Mailing Address						1	1 (88(181) 511 22101 5110			
45405 S. BARWICK RANCH CIR DELRAY BEACH FL 33445 US		4540 S. BARWICK CIR DELRAY BEACH FL 33445 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  07/27/1989				
2. Principal P	ace of Business	2a. Mailing Ad	dress				4. FEI Number		Apr	lied For
21		26					65-0135217		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 A	
22		27					5. Certificate of Status Desired		Fee Red	quired
City & State	е	City & Stat	e				6. Election Campaign Financia	ıg	\$5.00	
23		28					Trust Fund Contribution		Added to	Fees
Zip	Country	Zip		Country	<i>!</i>		8. This corporation owes the o	urrent year ir		٦ ا
24	25	29	30				Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agen	t	81	1		10. Name and Address of Ne		Agent	
ROLFES, FRANK H., JR. 502 PALM TR					Street A	FE.	S. FRANK H. S (P.O. Box Number is Not Acce BARWICK KAN	eptable)	lie.	
DELRAY BEACH FL 33483					7376	<i>-</i> 3	. DANNOLOGE TON	<i></i>	,,,,,	
,	VII DE 1071 / L 00 100			83						
				84		7011	eay Beach.	FI	85 Zip C - 324	145
11. Pursuant i	to the provisions of Sections 607.0502 agistered agent, or both, in the State of a familiar with, and accept the obligat	2 and 607.1508, Flo of Florida. Such cha	orida Statutes, t	he abov rized by	e-named c	corpora ration's	ation submits this statement for its board of directors. I hereby ac	he purpose o	f changing its reg	registered istered
agent. 1 ar SIGNATURE	familiar with, and accept the obligate	ions of, Section 607						SAN.	4,1999	
	Signature, typed or printed name of registered age.		(NOTE: Regi		nt signature rec	quired wh	ADDITIONS/CHANGES TO	DATE OFFICERS A	ND DIRECTO	RS IN 12
12.	OFFICERS AN		DELETE	13.			ADDITIONS/CHANGES TO	OFFICERS A	Change	Addition
TITLE	D		DELETE	1.1 TITLE						
NAME	HOLI ES, I IVAN II., OII.			1.2 NAME						
STREET ADDRESS	4040 O. BARTINER CITI.				TADDRESS					
CITY-ST-ZIP	DELRAY BEACH FL 33445	<u> </u>	DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP		· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition
TITLE		L		2.3 NAME	.		140		<del>-</del> -	
NAME					TADDRESS					
STREET ADDRESS				2.4 CITY-					•	
CITY-ST-ZIP TITLE				3.1 TITLE	31-ZIF				☐ Change	☐ Addition
NAME		_		3.2 NAME						
STREET ADDRESS					T ADDRESS					
CITY-ST-ZIP				3.4. CITY-						
TITLE				4.1 TITLE	1		· <u>·</u>		Change	☐ Addition
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREE	T ADDRESS					
CITY-ST-ZIP				4.4 CITY- S	ST-ZIP					
			DCI ETE	CATITIE					☐ 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 suppliemental 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, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

1-11-99 561-638-1890

☐ DELETE

☐ Change

☐ Addition