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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Apr 17 1997 8:00am

Secretary of State

941-957-0120

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L22635

(1)

SARASOTA QUAY, INC. Principal Place of Business Mailing Address C/O RENE A. GAREAU C/O RENE A. GAREAU 4273 BOCA POINTE DR 4273 BOCA POINTE DR SARASOTA FL 34238-5575 SARASOTA FL 34238 3a. Date of Last Report 3. Date Incorporated or Qualified 10/13/1989 02/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0157657 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GAREAU, RENE A. 4273 BOCA POINTE DR 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34238 83 City 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. I hereby accept the appointment as registered agent. Lam farmiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. RENE A. GAREAU SIGNATURE Signature, typed or profed name of registered agent and too if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition PD 1.1 TITLE THEF FENTON, SHELDON C. 1.2 NAME MAME 149 DUNVEGAN RD STREET ADDRESS 1.3 STREET ADDRESS M4P 2N8 TORONTO, ONTARIO CD CHY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change **X** Addition 2.1 TITLE DCS THEF GAREAU, RENE A. NAME 2.2 NAME **4273 BOCA POINTE DR** 2.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34238 2. 4 CITY - ST - ZIP CHY-S1-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 4.1 TITLE 100 F 4. 2 NAME HAME 4.3 STREET ADDRESS STREET ADDRESS CITY-SI-ZiP 4.4 CITY-ST-ZIP ☐ DELETE Addition 5.1 TITLE TULLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CiTY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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.

RENE A. GAREAU