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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

| • | 1996 | 100 | DI' | VISION OF | CORPORATION | SNC | ļ | | | | | | |
|----------------------------------|---|---|--|---------------------------------------|---------------------------------|-----------------------|-----------------------------------|--|--|---|------------------------------|--------------------------------|------------|
| DOCUN 1. Corporation | | (7) | | | | | | | | | | | |
| CHAN | iges in attii | UDE BOAT P | RENTALS, INC |) . | | | | | | | | | |
| | | | | | | | | 1 F 18 (\$1) 111 (\$ | | | | | |
| | | | | | | | | | | | | | |
| Principal Place | | Mailing Address | | | | | | | | | | | |
| NORTH BA' | Y LANDING Y VILLAGE FL 33141 | | 1402 KENNEDY CAUSEWAY BOX 213 NORTH BAY VILLAGE FL 33141 | | | | | | | | | | |
| US | , | NORTH E | | | | | | | | | | | |
| | | | US | US | | | | Date Incorporated 12/07/1989 | or Qualified | 3a. Dat | e of Last R 05/01/1 | | |
| 2. Principal Pla | ce of Business | 2a. Mailing Address | | | | | I. FEI Number | | <u></u> | | Applied For | | |
| 21 | | 26 | | | | | 65-01674 | 68 | | L | Not Applica | | |
| Suite, Apt. # | , etc. | | Suite, Apt. #, etc. | | | | Certificate of Statu | s Desired | tz/ | | 5 Additiona | I | |
| City & State | | City & State | | | | | · | Eleccion | | | Required | | |
| 23 | | | 28 | h | | | 6 | Election Campaign Trust Fund Contrib | _ | | | May Be | |
| Zip Country | | | Zip | · · · · · · · · · · · · · · · · · · · | | | 8. This corporation has liability | | | for intangible tax under s 199.032, Yes [2147] | | | |
| 24 | 25 | | 29 | | 30 | | | | | | | | |
| | 9, Name and A | Idress of Current | t Registered Age | nt | 81 | Name | 10 |). Name and Addre | ss of New R | egistered | Agent | | |
| NESBI | IT, DOUGLES | | | | 82 | | | | | | | | |
| 3024 RIVERLAND RD | | | | | | | Address (F | P.O. Box Number is I | Not Acceptabl | ie) | | | |
| FT LAU | JDERDALE FL 33 | | | | | | | | | | | | |
| | | | | | 84 | City | | · · · · · · · · · · · · · · · · · · · | | | 85 Zi | ip Code | |
| ** 6 | | | 1007.1500.5 | 71 41 17 | | <u> </u> | | | | FL | - `` ` | • | |
| or registere | ed agent, or both, in | the State of Florid | la. Such change w | as authorize | s, the above-i d by the corp | named co oration's | orporation board of | submits this stateme directors. I hereby ac | ent for the purpose the special contract the specia | pose of ch pintment as | anging its r s registered | registered o diagent. I ari | ffice n |
| | h, and accept the o | oligations of, Section | 30 607.0505, Flori | da Statutes. | | | | | | | | | |
| SIGNATURE _ | Signature, typed or printed | name of registered agent a | and title if applicable. | INOT | E: Registered Age | it signature r | equired when | reinstating) | | DATE | | | _ |
| 12. | - PD - | OFFICERS AND | | DELETE | 13. | | | ADDITIONS/CHAN | | | | | |
| TITLE NAME | NESBITT, DOUGLES | | [] | 1. 1 TITLE | 1.2 NAME | | bitt Dougl | ac E | | Change | Addition Addition | nc | |
| STREET ADDRESS 3024 RIVERLAND RD | | | | 1.3 STREET ADDRESS | | | Nes | Dill Dough | 62 1. | | | | |
| CITY-ST-ZIP | FT LAUDERI | DALE FL | | _ | 1.4 CITY-5 | | | | | | | | |
| TITLE | VSD- | PVPAAF | | DELETE | 2 1 TITLE | | | | | | ☐ Change | ☐ Additio | วก |
| NAME | NESBITT, M. 3024 RIVERI | | | | 2.2 NAME | | | | | | | | |
| STREET ADDRESS | FT-LAUDERI | | | | 2.3 STREET | | | | | | | | |
| CITY-ST-ZIP TITLE | | | ירו | DELETE | 2.4 CITY - 5 3. 1 TITLE | 1- ZIP | | | | | Change | ☐ Additio | on |
| NAME | | | | | 3.2 NAME | | | | | | | _ | |
| STREET ADDRESS | | | | | 3.3 STREE | T ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | Free | DELETE | 3.4 CITY - 8 | 31 - ZIP | | | | | | | |
| TITLE | | | <u></u> ∐ ı | DELETE | 4. 1 TITLE | | | | | | Change | Addition Addition | Π |
| NAME Street adoress | | | | | 4.2 NAME 4.3 STREET | 224900A | | | | | | | |
| CITY-ST-ZIP | | | | | 4.4 CITY - 5 | | | | | | | | |
| TITLE | | | | DELETE | 5. 1 TITLE | | | | | | Change | Addition Addition | on |
| NAME | | | | | 5.2 NAME | | | | | | | | |
| STREET ADDRESS | | | | | 5.3 STREET | | | | | | | | |
| CITY-ST-ZIP TITLE | | | | DELETE | 5.4 CITY - 5 6. 1 TITLE | ST-ZIP | | | | | Change | Addition | |
| NAME | | | L., ' | μ-LL 1 μ | 6.1 ITILE | | | | | | Grientyc | ☐ Adolin | ,"' |
| STREET ADDRESS | | | | | 6.3 STREET | ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | | | 6.4 CITY - S | ST-21P | | | | | | | |
| certify that | the information indi- | cated on this annu | al report or supple | mental annu | al report is tru | ue and ac | :curate an | e exemption stated in of that my signature s | shall have the : | same legal | l effect as it | f made und | er l |
| oath; that f appears in | am an officer or dir Block 12 Block | ector of the corpor 3 if changed, of o | ation or the receiv | er or trustee vith an addre | empowered iss. | to execut | le this rep | ort as required by Ch | apter 607, Flo | orida Stalui | tes; and th | at my name | i i |

Dougles F. Nesbitt Pros. dust 3/15/96 305-864-5941 SIGNATURE: