FILE	NOW: FII	LING FEE A	FTER N	MAY 1 IS	\$225.00	- -			
CORP ANNUA	ROFIT PORATION AL REPORT			ORIDA DEPARTA Sandra B. M Secretary of DIVISION OF CO	Mortham of State 🍑				
DOCUM		L47239		(3)					
1. Corporation I	Y BOAT LIFT	S, INC.							
Principal Place of	of Business		Mailing Ad						
8/5 N CCC	MES. L SLVD		975 N C	VILLET THE					
US I Leto	1 Balmor	al lanc	US 7	TOURY	almoval (n	3. Date Incorporated or Qualified 01/29/1990	3a. Date o 06/	Last Repo 20/1995	orl
2. Principal Plac			2a. Mailing	Address		4. FEI Number 65-0175059			plied For t Applicable
Suite, Apt. #	, etc.		Suite,	Apt. #, etc.		5. Certificate of Status Desired		\$8.75 A	Additional
City & State			27 City &	State		6. Election Campaign Financing		Fee Re \$5.00	<u> </u>
23		ountry	28 Ζμ		Country	Trust Fund Contribution 8. This corporation has liability fo	r intangible tax	Added tunders 19	
Zip 24	25		29		00]		s ∐No		
	9, Name and A	Address of Current	Registered A	gent	81 Name	10. Name and Address of New	negistered A	April.	
PINKERN	MAN, JAMES			11	82 Street Add	ress (P.O. Box Number is Not Accepta	ible)		
-1661-BA	4	570	S. He	Athwood	202				
INVERNE				· / · · · /					
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	ÍL		/	=/a 339	83 84 City		FL	11	Code
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signature	TL o the povisions of	Sections 607,000/2 a in the State of Figure optigations of Sections of American and American	and 607, 1508, a. Such chang on 607, 0505, F and tille if application	Fla 33; Florida Statutes, e was authorized lorida Statutes.	83 84 City the above-named corporation's bost	red when reinstaling)	urpose of chan pointment as re	ging its reg egistered a	gistered office gent. I am
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 economic reports of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 changed, or or an attachned with an address. 847-557-9300

SIGNATURE:

SCHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96

Daytinie Phone #