FILE N	NOW: FIL	ING FEE AF	TER MAY 1 I	S \$225.00	٦	
PROFIT		6. 6 X	FLORIDA DEPARTMENT OF STATE			
CORPORATION			Sandra B Mortham Secretary of State			
ANNUAL REPORT 1996			/	CORPORATIONS		
DOCUM		L50078	(9)			
1. Corporation No.	ame I E YACHT IN	IC.				ne cace Bears delle (1881)
ULTIMAT	L IAOHI II					<u> </u>
Principal Place of	Duringer		Mailing Address			DI 1811 ANGIN BIRKK BIRKK BIRKK BIRKK BIRKK KARI KABI
% RICHARD L.			% RICHARD L. MCCA	RTHY		
1511 SW 19TH	AVE.		1511 SW 19TH AVE. FT. LAUDERDALE FL	33312	0.154	3a. Date of Last Report
ft, lauderda US	LE FL 33312		US		3. Date Incorporated or Qualified 02/05/1990	07/25/1995
	- 4 D - in-ac		2a. Mailing Address		4. FEI Number	Applied For
2. Principal Place	e of Business		26		65-0169192	Not Applicable
Suite, Apt. #,	etc		Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		ountry	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for	r intangible tax under s. 199.032,
Zip 24	25	ountry	29	30	Florida Statutes 😝 Ye	s 🔲 No
	9. Name and	Address of Current F	Registered Agent	81 Name	10. Name and Address of New	Hegistered Agent
11. Pursuant to	o the provisions o	f Sections 607.0502 a in the State of Florida	ind 607.1508, Florida State . Such change was author	rtes, the above named corpized by the corporation's bo	oration submits this statement for the pard of directors. Thereby accept the ap	burpose of changing its registered office opointment as registered agent. I am
familiar with	, and accept the	obligations of, Section	n 607.0505, Florida Statut	e s		[SATE
SIGNATURE	Signature Typied or print	ed no in of roys served agreed in		13.	ADDITIONS/CHANGES TO O	FRICERS AND DIRECTORS IN 12
12.	D	OFFICERS AND	DIRECTORS	1) TITLE	7,0000000000000000000000000000000000000	Change 🔲 Addition
TITLE NAME	-	, RICHARD L.		1.2 NAME		
STREET ADDRESS	1511 SW 1			13 STREET ADDRESS		
CITY-ST-2IP	FT. LAUDE			1.4 CHTY - \$1 - ZIP		Change Addition
TITLE			☐ DELETE	2 1 11/11 (C vising
NAME				2.2 NAME		
STREE1 ADDRESS				2.3 STREET ADDRESS 2.4 City - St. Zip		
CITY-ST-ZIP			DELETE	3 1 THILF		Change Addition
TITLE	l		.	3.2 NAME		
NAME STREET ADDRESS				33 STREET ADDRESS		
CITY-ST-ZIP				3 4 CITY - ST - ZIP		Cnange Addition
TITLE			☐ DELETE	4 1 TITLE		□ cuange □ roomon
NAME				4.2 NAME		
STREET ADDRESS			•	4.3 STREET ADDRESS		
CITY-ST-7/P		-141	DELETE	4.4 C/TY-ST-ZIP 5.1 TITLE		Change 🔲 Addition
TITLE			C) pertur	5 2 NAME		
NAME				5.3 STREET ADDRESS		
STREET ADDRESS				5.4 CITY - \$1 - ZIP		
CITY - ST - ZIP	+		☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
11166				6.2 MAME		

CITY-ST-ZIP

14. It do hereby certify that the information supplied with this fling 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 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 13 if changed, or or an attachment with an address.

SIGNATURE:

SHALTURE AND TYPED ON PRINTED NAME OF SONING OFFICER OR DIRECTOR

5/196 984 447 3420