

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

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98 APR -2 PM 12: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. McIntham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M55911 (5)
1. Corporation Name
KING YACHTS, INC.

Principal Place of Business
701 BRICKELL AVENUE
SUITE 1600
MIAMI FL 33131

Mailing Address
701 BRICKELL AVENUE
SUITE 1600
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For Not Applied
21	26	07/21/1987	59-2832177	
22	27	5. Certificate of Status Desired		\$8.75 Additional Fee Required
23	28	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
24	29	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		Yes No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MARTIN, PEDRO A ESO. 1221 BRICKELL AVENUE MIAMI FL 33131	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when retreating.

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	AGUSTIN ROBLEDO, ANTONIO	1.2 NAME	
STREET ADDRESS	701 BRICKELL AVE. #1600	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	ROBLEDO, DELIA ETHEL	2.2 NAME	
STREET ADDRESS	701 BRICKELL AVE., #1600	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	ADAMI, ADAN	3.2 NAME	
STREET ADDRESS	701 BRICKELL AVE., #1600	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	DEGREGORIO, EVA AMALIA A	4.2 NAME	
STREET ADDRESS	701 BRICKELL AVE., #1600	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	ROBLEDO, JAVIER A	5.2 NAME	
STREET ADDRESS	701 BRICKELL AVE., #1600	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33131	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 am 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 officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. Block 12 or Block 13 if changed, or on an attachment with an address.