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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

FILED Jan 22 1998 8:00am Secretary of State

CONC	H YACHT COMPANY, INC.] 	
Principal Place of Business Mailing Address				-{	DIN MINNI BIBAT BIBIN BIBIN BIBIN BIBIT BIBEF TOBE
BUD AND MARYS MARINA PO BOX 972					
114 TONER LANE. PLANTATION KEY 114 TONER LANE: PL			ATION KEY		
ISLAMORADA FL 33036		ISLAMORADA FL 33036		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified	
				10/02/1987	
—	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
State And the area		26 BOX 97	۷	65-0019684	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		2 Starting Connecting Street in a	
23	-	28 (SLAMOR	PADA FL.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country 45	8. This corporation owes or has pa	
24	25		MONROE	Personal Property Tax due June	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
CA	APT TED D'ESPOSITO		81 Name		
85 SEMINOLE BLVD 82 Street Addre				ess (P.O. Box Number is Not Acceptab	No.
PLANTATION KEY			GZ Street Addre	ass (F.O. DOX NUMBER IS NOT Acceptate	ne)
TAVERNIER FL 33070					
			04 03		7.0
egen samenesse i gan i	and the same of th		84 City		FL 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	Signature, typed or printed name of registered agent		Registered Agent signature require		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	LODGE, ROBERT J.	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	15400 NW 34TH AVE		1.2 NAME		
STREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS		•
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY-ST-ZIP		Change Addition
	KELLER, BRUCE A.	E) pririt	2.1 TITLE		FT cusuae FT Modition
NAME	13899 BISCAYNE BLVD SUITE	: 204	2.2 NAME		
STREET ADDRESS	MIAMI FL	. 204	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	IND WILL E	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		000011	3.1 THEE		C outside C vanigati
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		E compa
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby c	ertify that the information supplied will	this filing does not qualify for	the exemption stated in S	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.					