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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortriam
Secretary of State
DIVISION OF CORPORATIONS

1996

MASOOO

(8)

1. Corporation Name ANNETTE'S YACHT SERVICE, INC. Procinal Place of Business Mailton Address											
Principal Place of Business 1341 SW 21ST TERR FT LAUDERDALE FL 33312 US Maining Address 1341 S W 21 TER FT LAUDERDALE FL US US											
03			03					3. Date Incorporated or Qualified 11/02/1987 3a. Date of Last Rep. 07/24/19			
. Principal Place of Business			. Mailing Address					DE 0040404			Applied For Not Applicable
Suite, Apt. #,	etc.	26	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional
City & State			City & State					6. Election Campaign Financing			Required May Be
3		28						Trust Fund Contribution		Adde	to Fees
Ζφ 4	Country 25	29	Zip	30 Co	ıntry			8. This corporation has liability for Florida Statutes ☐ Yes		x under s	199.032,
<u> 11</u>	9. Name and Address of Currer		tered Agent	[30]	Γ			10. Name and Address of New F		Agent	
					81	Name					
SANDY, ANNETTE					82	Street	Addres	s (P.O. Box Number is Not Acceptal	ole)		
1341 SW 21ST TERR FT LAUDEDALE FL 33312											
TT DAG	DEDALE 1 E 0001E				83					I I =	
					84	City			FL	85 Zq	o Code
SIGNATURE S	gradure, typed or printed name of registered agent OFFICERS AN			Die Angesteren 13.		t svyratur-	redported v	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
NAME	SANDY, ANNETTE			121					_	_	
STREET ADDRESS	1341 \$ W 21 TERRACE FT LAUDERDALE FL			139	I BEAL	address					
CITY-ST-ZIP	FI DAODERDALE FL		DELETE	2 1	ITY - S	r - ZIP	1.50	a president		Change	adition
TIFLE NAME			[_] beer in	221			F	e president IWAND J. SANDY 41 SW 21 Terrac -howderdale, F	L.] Criange	1 Mauriton
STREET ADDRESS						ADDRESS	13	41 SW 21 Terrac	e		
CITY-ST-ZP				2 4 0	ITY - S	f - ZIP	FH	howderdale, F	1 333	312	
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NAME				3 2 N							
STREET ADDRESS						ADDRESS					
DITY-ST-ZIP TITLE			DELÊTE	4 1	ITY - S TITLE	1 - 716	 		Г	Change	Addition
NAME				421							_
STREET ADDRESS				435	REEL	ADDRESS					
CITY-ST-ZIP	 			440	TY - S	1 - ZIP		N. 21 - T. W. M. 1 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -			. <u>.</u>
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NAME				621					_		
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP				640	ιΤΥ·S	T - ZIP					
14. I do hereby certify that to acth; that I appears in I	certify that the information supplied the information indicated on this and am an officer or director of the Block 12 or Block 13 if changed or	With this ual repor oration of on again	filing is voluntarily fur the supplement and the receiver or trusts achieved with an	nished and nual report se empowe Ire ss	does is tru red t	s not qui le and a lo execu	alify for ocurate ite this	the exemption stated in Section 119 and that my signature shall have the sport as required by Chapter 607, F	.07(3)(k), Flo same legal lorida Statute	rida Statut effect as if es; and tha	es. I further made under at my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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