

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

FILED
Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P05842** (0)
1. Corporation Name
WESTWORLD BOATING, INC.

Principal Place of Business C/O PEDRO G. VALDES CPA. P.A. 5100 N. FEDERAL HWY. #301 FT LAUDERDALE FL 33308	Mailing Address C/O PEDRO G. VALDES CPA. P.A. 5100 N. FEDERAL HWY. #301 FT LAUDERDALE FL 33308-3842
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2. Principal Place of Business 21 1323 SE 17 ST Suite, Apt. #, etc 22 City & State 23 FORT LAUDERDALE Zip 24 33316	2a. Mailing Address 26 1323 SE 17 ST Suite, Apt. #, etc 27 City & State 28 FORT LAUDERDALE Zip 29 33316 Country 30 BROWARD
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3. Date Incorporated or Qualified 04/30/1985	3a. Date of Last Report 02/05/1996
4. FEI Number 59-2313932	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

**HOFMEYR, HAL D.
C/O PEDRO G VALDES
5100 N FEDERAL HIGHWAY STE 301
FT LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name ROYALE MANAGEMENT SERVICES INC.	85 Zip Code 33311
82 Street Address (P.O. Box Number is Not Acceptable) 2319 N ANDREWS AVE	
83	
84 City FORT LAUDERDALE FL	

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 **Theresa J. Ward, Secretary Treas Royale Management Services Inc. 1/27/97**
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS

TITLE	S	☐ DELETE
NAME	HOFMEYR, DEIDRE E	
STREET ADDRESS	5100 N. FEDERAL HIGHWAY STE. 301	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	P	☐ DELETE
NAME	HOFMEYR, HAL D.	
STREET ADDRESS	5100 N. FEDERAL HIGHWAY STE. 301	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	T	☒ DELETE
NAME	VALDES, PEDRO G	
STREET ADDRESS	5100 N. FEDERAL HWY. STE. 301	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS 3850 GALT OCEAN DR #304	
1.4 CITY-ST-ZIP FORT LAUDERDALE FL 33308	
2.1 TITLE Secretary	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS 3850 GALT OCEAN DR # 304	
2.4 CITY-ST-ZIP FORT LAUDERDALE FL 33308	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

PW 4-25-97
Bank Dep \$ 165.00

14. I do 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 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.

SIGNATURE: **[Signature]**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)