## **EILE-NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000008944 (0)

PIRATE ENTERPRISES, INC.

**FILED** May 11 1998 8:00am Secretary of State

A ANNI LAGI AKN ANTIN LINER ANTIN MUNIC NOTIN KAKAN MUNIK KAKA ANTIN KAKA NINI KAKA NINI KAKA

Principal Place	of Business	Mailing Address					18119 (811) B1811 8181 1481		
5320 SW 28TH TERRACE FT. LAUDERDALE FL 33312 US		3325 GRIFFIN RD. Suite #119 FT. Lauderdale FL 33312				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 12/03/1992	:		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For			
21		26	26			65-0389046	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & Stato		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip 24	Country 25	Ζφ <b>29</b>	30 Coi	intry		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes  No		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered A	gent		
	MAN, MARC L 0 SW 28TH TERRACE			81	Name				
FT. LAUDERDALE FL 33312			82	Street Address (P.O. Box Number is Not Acceptable)					
				83					
				84	City	FL	85 Zip Code		
11. Pursuant to	o the provisions of Sections 607.0	502 and 607.1508, Florid	a Statutes, the a	bove	-named corp	poration submits this statement for the purpose of	changing its 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 and tills if applicable (NOTE Registered Agent signature required when reinstating)  DATE											
10		<del></del>	logistered Agent signature required when reinstaling) DATE								
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	PST	☐ DELETE	1.1 TITLE		Change	Addition					
NAME	WYMAN, MARC L		1.2 NAME								
STREET ADDRESS	5320 SW 28TH TERRACE		1.3 STREET ADDRESS								
CITY-ST-ZIP	FT. LAUDERDALE FL 33312		1.4 CITY-ST-ZIP								
TITLE		☐ DELETE	2.1 TITLE	-	Change	Addition					
NAME			2.2 NAME								
STREET ADDRESS			2.3 STREET ADDRESS								
CITY-ST-ZIP			2. 4 CITY - ST - ZIP								
TITLE		DELETE	3.1 TITLE		- Change	Addition					
NAME			3.2 NAME								
STREET ADDRESS			3.3 STREET ADDRESS								
CITY-ST-ZIP			3.4. CITY-ST-ZIP								
TITLE		DELETE	4.1 TITLE	•	☐ Change	Addition					
NAME			4. 2 NAME								
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 ADORESS			i					
CITY - ST - ZIP			5.4 CITY-ST-ZIP								
TITLE		DELETE	61 TITLE		Change	Addition					
NAME			62 NAME								
CTREET ADDRESS			C 2 CTDCCT ADDRCCC								

ling does not quifify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is true of it accurate and that my signature shall have the same legal effect as if made under oath; that I am an trustice employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in