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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 24 1997 8:00am Secretary of State

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DOCUMENT #	P93000026403	(4)

84 BOAT WORKS, INC.

07 50711	Trointe, mo.						
Principal Place	e of Business	Mailing Address					
990 W ST RD 84 990 W ST RD 84 FORT LAUDERDALE FL 33315 US US		3315-2432					
						3. Date Incorporated or Qualified	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				<b>65-0407892</b> Not Applicat	ıle
Suite, Apt. i 22		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	
<b>23</b> Zip	Country	28 Zip	Cour			Trust Fund Contribution Added to Fees	4
24	25	29		itry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	- 1
24	9. Name and Address of Curre		30			Florida Statutes Yes I No  10. Name and Address of New Registered Agent	$\dashv$
DAII	EY, PATRICK L ESQ.			<b>B1</b> Nar	ne	14. The state of t	ᅥ
	EAST ATLANTIC BLVD.						
	. 300			<b>82</b> Stre	et Addre	ess (P.O. Box Number is Not Acceptable)	
	IPANO BEACH FL 33062		<u> </u>	83			$\dashv$
rom	IFARO BLACITY E 33002						
				B4 City	•	FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 607 056 egistered agent, or both, in the State	02 and 607.1508, Florida Statu of Florida Such change ws.	tes, the ab	ove-nam	ed corpo	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	d
SIGNIATURE	Signatur Typed is pineled name of registered ag						_
12.		eni and pile is applicable (NO ID DIRECTORS	13.	Agent sign	ture required	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	$\dashv$
TOLE	P	DELETE	1.1 [1]	ı F	<del></del>	Change Addition	
NAME	BOHNE, EDWARD J II		1.2 NA		ŀ		·
STREET ADDRESS	990 W ST RD 84			reet addre	22		
CITY-S1-ZIP	FORT LAUDERDALE FL			Y-ST-ZIP			
TITLE	ST	DELEYE	2.1 TIT		<b>—</b>	Change Additi	on
NAME	BOHNE, LINDA A		2.2 NA	ME			ĺ
STREET ADDRESS	990 W ST RD 84		2.3 ST	REET ADDRE	ss		-
CITY - ST - ZIP	FT LAUDERDALE FL		2 4 Ci	TY-ST-ZIP		See 1	
TITLE	VP	DELETÉ	3.1 TIT	<del></del>		Change Additi	on
NAME	BOHNE, EDWARD J II		3.2 NA	ME			
STREET ADDRESS	990 W ST RD 84		3.3 ST	REET ADDRE	ss		-
CITY - S1 - ZIP	FT LAUDERDALE FL		34 C	IY-ST-ZIP			
TITLE		☐ DELETE	4.1 TIT	LE		☐ Change ☐ Addili	on
NAME			4. 2 NA	ME			-
STREET ADDRESS			4.3 ST	REET ADDRE	ss		
CITY - ST - ZIP			4.4 CIT	Y-ST-ZIP			
TITLE		DELETE	5.1 TIT	LE		Change Additi	on
NAME			5.2 <b>N</b> A	ME			-
STREET ADDRESS			5.3 STI	REET ADDRE	SS		-
CITY+ST-ZIP				Y-ST-ZIP			$\square$
TITLE		☐ DELETE	6.1 TIT			Change Additi	on
NAME			6.2 NA				-
STREET ADDRESS				REET ADDRE	SS	•	-
CITY-S1-ZIP	we earth, that the referencian and the	ed with this files deep		Y-ST-ZIP		Control (40 07/0)(2) Florida (2)	_
information	y certify that the information suppli€ a indicated on this applied report or	our with this hing does not qual	ity for the c	exemptic	n stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the	

information included 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 or larm an officer or director of the corporation or the receiver or flustee 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.