

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

APPROVED
AND
FILED

50 MAY - 1 1995

SECRET
TALONHARVEST TECHNICA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Teresa B. Northcutt
Secretary of State
Tallahassee, FL 32399-0400

DOCUMENT # P93000058889 (5)

1. Corporation Name:

VIP BOAT RIGGING, INC.

Principal Place of Business

2025 LAKE AVE. S.E.
UNIT C
LARGO FL 34641

Mailing Address

P. O. BOX 1344
DUNEDIN FL 34697
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 08/23/1993	3a. Date of last report 05/01/1994
4. FEI Number 59-3189194	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contributions: ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21. State: Apt. # etc.	26. State: Apt. # etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent										
REINKE, HELEN F 329 JEAN STREET PALM HARBOR FL 34683	<table border="1"> <tr> <td>81. Name</td> <td>BONNER, SAM W.</td> </tr> <tr> <td>82. Street Address (P.O. Box Number is Not Acceptable)</td> <td>2906 PINE CONE CIRCLE</td> </tr> <tr> <td>83.</td> <td></td> </tr> <tr> <td>84. City</td> <td>CLEARWATER FL</td> </tr> <tr> <td>85. Zip Code</td> <td>34620</td> </tr> </table>	81. Name	BONNER, SAM W.	82. Street Address (P.O. Box Number is Not Acceptable)	2906 PINE CONE CIRCLE	83.		84. City	CLEARWATER FL	85. Zip Code	34620
81. Name	BONNER, SAM W.										
82. Street Address (P.O. Box Number is Not Acceptable)	2906 PINE CONE CIRCLE										
83.											
84. City	CLEARWATER FL										
85. Zip Code	34620										

11. Pursuant to the provisions of Sections 607.04(2) and 607.14(4) 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 further authorized to accept the qualifications of the new registered agent under Florida Statutes.

SIGNATURE: *[Signature]* **SAM W. BONNER, President 4-30-95**

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																										
<table border="1"> <tr> <td>NAME</td> <td>PD BONNER, SAM W</td> </tr> <tr> <td>STREET ADDRESS</td> <td>2906 PINE CONE CIRCLE</td> </tr> <tr> <td>CITY & STATE</td> <td>CLEARWATER FL 34620</td> </tr> <tr> <td>NAME</td> <td>STD REINKE, HELEN F</td> </tr> <tr> <td>STREET ADDRESS</td> <td>329 JEAN ST.</td> </tr> <tr> <td>CITY & STATE</td> <td>PALM HARBOR FL 34683</td> </tr> </table>	NAME	PD BONNER, SAM W	STREET ADDRESS	2906 PINE CONE CIRCLE	CITY & STATE	CLEARWATER FL 34620	NAME	STD REINKE, HELEN F	STREET ADDRESS	329 JEAN ST.	CITY & STATE	PALM HARBOR FL 34683	<table border="1"> <tr> <td>1. NAME</td> <td></td> </tr> <tr> <td>2. STREET ADDRESS</td> <td></td> </tr> <tr> <td>3. CITY & STATE</td> <td></td> </tr> <tr> <td>4. NAME</td> <td></td> </tr> <tr> <td>5. STREET ADDRESS</td> <td></td> </tr> <tr> <td>6. CITY & STATE</td> <td></td> </tr> <tr> <td>7. NAME</td> <td></td> </tr> <tr> <td>8. STREET ADDRESS</td> <td></td> </tr> <tr> <td>9. CITY & STATE</td> <td></td> </tr> <tr> <td>10. NAME</td> <td></td> </tr> <tr> <td>11. STREET ADDRESS</td> <td></td> </tr> <tr> <td>12. CITY & STATE</td> <td></td> </tr> <tr> <td>13. NAME</td> <td></td> </tr> <tr> <td>14. STREET ADDRESS</td> <td></td> </tr> <tr> <td>15. CITY & STATE</td> <td></td> </tr> </table>	1. NAME		2. STREET ADDRESS		3. CITY & STATE		4. NAME		5. STREET ADDRESS		6. CITY & STATE		7. NAME		8. STREET ADDRESS		9. CITY & STATE		10. NAME		11. STREET ADDRESS		12. CITY & STATE		13. NAME		14. STREET ADDRESS		15. CITY & STATE	
NAME	PD BONNER, SAM W																																										
STREET ADDRESS	2906 PINE CONE CIRCLE																																										
CITY & STATE	CLEARWATER FL 34620																																										
NAME	STD REINKE, HELEN F																																										
STREET ADDRESS	329 JEAN ST.																																										
CITY & STATE	PALM HARBOR FL 34683																																										
1. NAME																																											
2. STREET ADDRESS																																											
3. CITY & STATE																																											
4. NAME																																											
5. STREET ADDRESS																																											
6. CITY & STATE																																											
7. NAME																																											
8. STREET ADDRESS																																											
9. CITY & STATE																																											
10. NAME																																											
11. STREET ADDRESS																																											
12. CITY & STATE																																											
13. NAME																																											
14. STREET ADDRESS																																											
15. CITY & STATE																																											

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2) Florida Statutes. I further certify that the information included in 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 this corporation or the person or person empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report or on an attachment with an address.

SIGNATURE: *[Signature]*
SAM W. BONNER, PRESIDENT

4-30-95 813 5312877