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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DIVISION OF (1998) DOCUMENT # P93000058889 (5)

VIP BOAT RIGGING, INC. Principal Place of Business Mailing Address 206 N.E. BLVD N. 296 N.E. BLVD N. ST. PETERSBURG FL 33702 UNIT C DO NOT WRITE IN THIS SPACE ST. PETERSBURG FL 33702 3. Date Incorporated or Qualified 08/23/1993 2. Principal Place of Busines 2a. Mailing Address Applied For 296 n.E. Birdr 59-3189194 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes Yes Personal Property Tax due June 30. 29 30 Name and Address of New Registered Agent Name and Address of Current Registered Agent Name BONNER, SAM W. 296 N.E. BLVD N. 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33702 83 City Zip Code 85 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 Signature, typed or printed name of (rigistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change ___ Addition PO NAME BONNER, SAM W 1.2 NAME 296 N.E. BLVD N. 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 1.4 CITY - ST - ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME BONNER, LYNN E. 2.2 NAME STREET ADDRESS 296 N.E. BLVD N. 2.3 STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE 4.1 TITLE ■ Addition TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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: SIMME BONN

Lynn E. Bonner

4/21/98 5216055

FILED

Apr 27 1998 8:00am

Secretary of State

ZE034 (10/97)