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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P93000063340 (2)

GDB YACHTS, INC.

Principal Place of Business Mailing Address						T TREATINGS FOR THE FRANK TOTAL BRIDGE FOR THE F	Maret Antin Holds	i Dillog Hilli oli	ALL BALL 1981		
3840 YACHT STE 1801 AVENTURA F		3640 YACHT CLUB DR MIAMI FL 33180 US				DO NOT WRIT	E IN THIS S	PACE			
US CONTRACTOR OF THE CONTRACTO							3. Date Incorporated or Qualified 09/13/1993				
2. Principal P	Place of Business		2a. Mailing Address			4. FEI Number		Ar	oplied For		
21			26 3640 YACHT CLUB DR.			DR.	65-0439365		 	ot Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc. 27 STE, 1601				5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
City & State			City & State AVENTURA, FL				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	May Be to Fees	
Zip	Country		トー うろしんひ トー・		intry		8. This corporation owes or has p	as paid the current year Intangible			
24	25 25		120		15	<u>. </u>	Personal Property Tax due Jun		Yes L No		
9. Name and Address of Current Registered Agent						Name	10. Name and Address of New R	egistered A	gent		
	E BATTISTI, ARC			ĺ	81						
3640 YACHT CLUB DR #1601 MIAMI FL 33180						Street Addr	ess (P.O. Box Number is Not Accepta	ıble)			
MIMMI FL 33 100											
					24	64.			lant with	0-4-	
					84	City		FL	85 Zip (Code	
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											
10	Signature typed or prin	ted name of registered agent an OFFICERS AND D		TE Registere:	1 Agen	it signature require	ed when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICCOS AND	DIRECTOR	2C IN 12	
12.	PT	OFFICERS AND L	DELETE	1.1 TI	TLF		ADDITIONS/CHANGES TO OFF		Change	Addition	
NAME		I, GIANCARLO		12 N/		İ			ondrigo		
STREET ADDRESS		T CLUB DR #1601				AODRESS					
CITY-ST-ZIP	MIAMI FL				TY-ST						
TITLE	VS		☐ DELETE	2.1 7/1					Change	Addition	
NAME	DE BATTIST	i, arcelia		2.2 N/	ME)					
STREET ADDRESS		T CLUB DR #1601		2.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL			2.4 C	ITY-ST	r-ZIP					
TITLE			☐ DELETE	3.1 TH		1		į	Change	Addition	
NAME				3.2 NA						İ	
STREET ADDRESS						ADDRESS					
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NAME				4. 2 N					one ige		
STREET ADDRESS				1		ADDRESS					
CITY-ST-ZIP					TY-ST	1					
TITLE			DELETE	51 TII					Change	Addition	
NAME				5.2 NA	ME						
STREET ADDRESS				5.3 \$1	REET A	NDORESS					
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		5.4 CI	TY - \$T	- ZIP					
TITLE			☐ DELETE	6.1 317	ILE			ι	Change	Addition	
NAME				6.2 NA		İ					
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP	portify that the info	rmation expedied with	this filling does not a self-		TY-ST		Section 119.07(3)(i), Florida Statutes.	I further cort	ify that the	information	
indicated officer or o	on this amoual rep director of the cor	port or supplemental ar	inual report is true and ac r or trustee empowered to	ccurate and	d tha	t my signatur	re shall have the same legal effect as irred by Chapter 607, Florida Statutes	if made unde	er oath; tha	atlam an [
DIOCK 12 (or projek 13 it cha	nged, or on an attachn	ierii with ari adoress.	L.	^						