

FILE 1995 APR 21 10 35 AM MAY 1 1995

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra O. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 21 AM 8:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000076488 (4)

1. Corporation Name

BRIAN FUCHS WATER SPORTS, INC.

Principal Place of Business

**190 AUSTRALIAN AVE.
WEST PALM BCH FL 33406
US**

Mailing Address

**1810 LAKE DRIVE
DELRAY BEACH FL 33444**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Organized

10/29/1993

3a. Date of Last Report

04/19/1994

4. FEI Number

05-0148445

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under § 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**DENMAN, JAMES B
500 E. BROWARD
STE-1050
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

2400 E. COMMERCIAL BLVD.

83.

SUITE 208

84. City

FT. LAUDERDALE

FL

85. Zip Code

33308

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, in 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

(NOTE: Registered Agent signature required when reappointing)

DATE

4-10-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	FUCHS, BRIAN
STREET ADDRESS	1810 LAKE DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33444
TITLE	D
NAME	FUCHS, CURTIS
STREET ADDRESS	1810 LAKE DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33444
TITLE	D
NAME	DESANTIS, RICHARD
STREET ADDRESS	1810 LAKE DRIVE
CITY-ST-ZIP	DELRAY BEACH FL 33444
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	D SHIRLEY FUCHS
3.3 STREET ADDRESS	1810 LAKE DR
3.4 CITY-ST-ZIP	DELRAY BEACH, FL 33444
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIAN FUCHS

3-13-95

DATE

407-478-7171

TELEPHONE NUMBER