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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000083192 (3) DOCUMENT #

ROYAL YACHT RESTORATIONS, INC.

FILED Mar 12 1998 8:00am Secretary of State



| Principal Place | e of Business | Mailing Addre | Mailing Address | | | | | |
|------------------------------|--|-------------------------------|--------------------------------------|---------------|--------------------|---|---------------|--------------------|
| 6 LOTUS CT. | | | P.O. BOX 12063 PENSACOLA FL 32501 | | | | | |
| PENSACOLA I | FL 32507 | | | | | DO NOT INDITE IN THE OTHER | | |
| US | | US | US | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | | Date Incorporated or Qualified 11/29/1993 | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Ad | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 | | 26 | 26 | | | 59-3220825 | <u> </u> | Not Applicable |
| Suite, Apt. | ₩, etc | | Suite, Apt. #, etc. | | | | \$8. | 75 Additional |
| 22 | | 27 | 27 | | | 5. Certificate of Status Desired | | e Required |
| City & State |) | A | City & State | | | 6. Election Campaign Financing | \$5 | .00 May Be |
| 23 | | 28 | 28 | | | Trust Fund Contribution | | ded to Fees |
| Ζιρ | Country | 7ip | | Country | , | 8. This corporation owes or has paid to | ne current ve | ar Intangible |
| 24 | 25 | 29 | 30 | , i | | Personal Property Tax due June 30. | _ | 1 0 No |
| | 9. Name and Address of Cur | rent Registered Agen | | ' | | 10. Name and Address of New Regist | ered Agent | |
| LOZ | ZIER, DANIEL R | | | 81 | Name | | | |
| 125 WEST ROMANO STREET | | | | | <u> </u> | 10 6 D. N. d. | | |
| ONE PENSACOLA PLAZA, STE 222 | | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable) | | 1 |
| PENSACOLA FL 32501 | | | | 83 | | | | |
| , -, | | | | | | · · · · · · · · · · · · · · · · · · · | 1 | |
| | | | | 84 | City | | FL 85 | Zip Code |
| 11. Pursuant t | to the provisions of Sections 607.0 | 0502 and 607 1508. Flo | orida Statutes | the above | le.named.cor | rooration submits this statement for the purp | ose of chano | ing its registered |
| office or re | egistered agent, or both, in the St | ale of Florida, Such ch | ange was auth | orized by | the corpora | rporation submits this statement for the purp ation's board of directors. I hereby accept th | e appointme | nt as registered |
| | m ramiliar with, and accept the ob | eligations of, Section 60 | 37.U3U3, FIORIO | a Statute | 5. | | | |
| SIGNATURE | Signature, typed or printed name of registered | agent and title it applicable | (NOTE Re | enistered Age | not signature requ | uired when reinstating) | ATE . | |
| 12. | | AND DIRECTORS | ,,,,, | 13. | | ADDITIONS/CHANGES TO OFFICER | S AND DIREC | TORS IN 12 |
| TITLE | Р | | DELETE | 1.1 TITLE | | | [] Cha | |
| NAME | RUSSENBERGER, RAY | | | 1.2 NAME | ĺ | | | |
| STREET ADDRESS | 804 S PALAFOX | | | 1.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | PENSACOLA FL | | | 1.4 CITY- S | | | | |
| TITLE | | | DELETE | 2.1 TITLE | ~~~ | | [] Cha | ange Addition |
| NAME | MATTHEWS, JOHNNY | | | 22 NAME | | | | _ |
| STREET ADDRESS | 804 S PALAFOX | | | 2.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | PENSACOLA FL | | | 2 4 CITY- | | | <u>.</u> . | |
| TITLE | | | DELETE | 3 1 TITLE | <u> </u> | | [] Cha | ange Addition |
| NAME | | | | 3 2 NAME | | | | |
| STREET ADDRESS | | | | 3 3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | | 3.4. C(TY- | | | | |
| TITLE | | | DELETE | 4.1 TITLE | VI - LII | | Cha | ange Addition |
| NAME | | _ | | 4.2 NAME | | | | |
| STREET ADDRESS | | | | 4.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | | 4.4 CITY-S | | | | |
| TITLE | | | DELETE | 5 1 TITLE | 71 - 61F | | [_] Cha | ange Addition |
| NAME | | | | 52 NAME | | | | |
| | | | | | 10000ECC | | | |
| STREET ADDRESS | | | | 5.3 STREET | | | | |
| CITY-ST-ZIP | | | DELETE | 5.4 CITY - 8 | 51 - ZIP | | T T Cha | nge Addition |
| TITLE | | L | DELLIE | 6.1 TITLE | | | [_] 018 | " Noneigh |
| RAME | | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | | 6.3 STREET | | | | |
| CITY-ST-ZIP | | | | 6.4 CITY - S | T-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:

(850) 432-0647