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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000086901

VELOCITY POWERBOATS, INC.

Principal Place of Business Mailing Address 1690 FITZPATRICK POINT 1690 FITZPATRICK POINT PORT OF SANFORD PORT OF SANFORD SANFORD FL 32771 SANFORD FL 32771 2. Principal Place of Business 2a. Mailing Address 26 21

## **FILED** Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/14/1993 4. FEI Number Applied For Not Applicable 59-3220091 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 28 Trust Fund Contribution Added to Fees 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name STEPP, KIMBERLY 1690 FITZPATRICK POINT Street Address (P.O. Box Number is Not Acceptable) SANFORD FL 32771 Zip Code City 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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE ☐ Change \_\_\_ Addition TITLE STEPP, KIMBERLY NAME 1.2 NAME 1690 FITZPATRICK POINT PORT OF SANFORD STREET ADDRESS 1.3 STREFT ADDRESS SANFORD FL 32771 1.4 CITY - ST- ZIP CITY - ST - ZIP Addition Change ☐ DELETE 2.1 TITLE TITLE STEPP, STEVEN 2.2 NAME NAME 1690 FITZPATRICK POINT OF SANFORD 2.3 STREET ADDRESS STREET ADDRESS SANFORD FL 32771 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change \_\_\_ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 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: