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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

 -				→	
DOCU 1. Corporation	MENT # P9400	0006464 (9)		
BEACH	H & BOAT INVESTMENTS.	INC.			
				A HARLIFORN FIR FRINK BENIK BRIAN BRIAN BRIAN BRIAN BRIAN BRIAN	AT BANK OFFICE BANK THAT
					<u> </u>
Principal Plac	ce of Business	Mailing Address		1 (00)(01) (10 10)(010((10(() 00)() 00)() 00)() 00)	IA Bittis SiBIR Giatt Gibt 4EB!
14848 OLO 41 777 BRICKELL AVE.					
UNIT 6 5TH FLOOR NAPLES FL 34110 MIAMI FL 33131				DO NOT WRITE IN THIS	SPACE
US	0411 0	US		3. Date incorporated or Qualified	
				01/27/1994	
<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0468281	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	le .	City & State		- Cleating Operation Street	
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24	25	29	30		Yes No
	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
	ANTOR, STEVEN L		81 Name		
	7 BRICKELL AVE.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	H FLOOR		-		
į Mi	AMI FL 33131		63		
			84 City	FL	85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508 Florida Stat	utes the above-named cor		l changing its registered
office or	registered agent, or both, in the Stat	e of Florida Such change was	s authorized by the corpora	rporation submits this statement for the purpose o ation's board of directors. I hereby accept the app	ointment as registered
Į.	am taminar with, and accept the oblig	Janons of, Section 607.0505, i	rioriga Statutes.		
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (Ni	OTE: Registered Agent signature requ	uired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	·
TITLE	PSD according to the second	☐ DELETE	1.1 TITLE		Change Addition
NAME	SCHREIBER, BERND		1.2 NAME		
STREET ADDRESS	14848 OLD 41, UNIT 6 NAPLES FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VID	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	SCHREIBER, MICHAELA		2.2 NAME		
STREET ADDRESS	14848 OLD 41, UNIT 6		2.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		Dec Fre	3.4. CITY-ST-ZIP		Chance Ladge
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	į		6.3 STREET ADDRESS		{
CITY-ST-ZIP			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 charged, or on an attachment with an address.

2E034 (10/97)

Feb 26 1998 8:00am

Secretary of State