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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000016386

FISH CHASER, INC.

Principal Place of Business Mailing Address						
106 WOODMUIR COURT PALM BEACH GARDENS FL 33418 US 106 WOODMUIR COURT PALM BEACH GARDENS FL US US			33418			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 03/02/1994
2. Principal Place of Business 2a. Mailing Address				—		
—						
26						65-0463750 Not Applicable \$8.75 Additional
22	w, etc.	27	Suite, Apr. #, etc.			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current year Intangible
24	25	29 30	0			Personal Property Tax.
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
EK, ANN 106 WOODSMUIR COURT PALM BEACH GARDENS FL 33418				81 82 83		ress (P.O. Box Number is Not Acceptable)
				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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Register				Agent	signature require	ed when reinstating) DATE
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE 1.1		1.1 TITL	Æ		☐ Change ☐ Addition
NAME	<u></u>		1.2 NAM	ИE	Ì	
STREET ADDRESS			1.3 STA	REET.	ADDRESS	
CITY-ST-ZIP			1.4 CIT	Y-ST	-ZIP	
TITLE	SD	☐ DELETE	2.1 TITLE			Change Addition
NAME	EK. DONALD			ΜE		}
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	DALLA BELOW GARDENO EL		2.4 CIT	Y-ST	r-ZiP	·· · ·
TITLE	VP	☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME	GOLDIN, ARNOLD S		3.2 NAME			
STREET ADDRESS	100 To 10				ADDRESS	
CITY-ST-ZIP DELRAY BEACH FL 33483			3.4. CITY-5T-ZIP		ĭ	,
TITLE			4.1 TITL			☐ Change ☐ Addition
NAME			4. 2 NA	ME	1	

64 CITY-ST-ZIP 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 aignature 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an attachment with an address, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

□ DELETE

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Change

☐ Change

Addition

☐ Addition