## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

1. Corporation	MENT # P9400 Name SEAS YACHT SERVICE, II		75 (6)	)						
Principal Place of Business 777 SW 9TH TERR. R		6981 N	Mailing Address 6981 N.W. 30TH AVENUE FT. LAUDERDALE FL 33309				.			
POMPANO FL US	L 33069	* * * * * * * * * * * * * * * * * * *				3. Date Incorporated or Qualified 04/05/1994		e of Last Re 5/01/199		
2. Principal Pla	ace of Business	2a. Mailin	g Address	··· <u></u>			4. FEI Number NOT APPLICABLE			Applied For Not Applicable
Suite, Apt. #	#, etc.	Suite,	Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State		28	State	T	····		6. Election Campaign Financing Trust Fund Contribution		Added	O May Be d to Fees
Ζιρ <b>24</b>	Country  25  9. Name and Address of Curr	Zip 29	A	Country 30	y 		8. This corporation has liability to Florida Statutes Ye 10. Name and Address of New	s 🔲 No		199.032,
<del></del>	g, Name and Address of Curr	ent negistered	Ageill .	Bi	Na	me	10. Name and Address of New	uañistai an	Mail	
WAKSMAN, DONALD 6981 N.W. 30TH AVENUE FT. LAUDERDALE FL 33309					B2 Street Addre		SS (P.O. Box Number is Not Accepta	ible)		
11. 000	OCHONIC I E COOLS			84	<u> </u>	у		FL	85 Zip	p Code
or register familiar wit SIGNATURE _	ed agent, or both, in the State of Fi th, and accept the obligations of, Se Sgnature, speed or printed name of registered as	orida, Such chang ection 607.0505, I ent and title if applicable	ge was authorizer Florida Statutes.	d by the corp	ooratio	on's board		pointment as	s registered	Lagent, Lam
TILE	OFFICERS A	AND DIRECTORS	DELETE	13. 1. 1 TITLE			ADDITIONS/CHANGES TO OF		<del></del>	Addition
NAME	WAKSMAN, DONALD		DECENE	1.2 NAME				'		
STREET ADDRESS	6981 N.W. 30TH AVENUE			1.3 STREE		rec				
CITY-ST-ZIP	FT. LAUDERDALE FL 3330	9		1.4 CITY-		Loo				
TITLE			DELETE	2 1 TITLE					Change	Addition
NAME				2.2 NAME					_	_
STREET ADDRESS				2 3 STREE		ESS				
CITY - S1 - ZIP				2.4 CITY-						
TITLE			☐ DELETE	3 1 TITLE					Change	Addition
NAME				3 2 NAME						
STREET ADDRESS				3.3. STREE	ET ADDR	ESS				
CITY - ST - ZIP				3.4 CITY - 1						
TILE			DELETE	4. 1 TITLE					Change	☐ Addition
NAME Dancer Indoorse				4.2 NAME		rec				
STREET ADDRESS				4.3 STREE		192				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - 3 5 1 TITLE					Change	☐ Addition
NAMÉ			_ percit	5.2 NAME					5a.g.	
STREET ADDRESS				5.3 STREE		FSS				
				5.4 CITY-						
CHY-ST-ZIP TITLE			DELFTE	6. 1 TITLE					Change	Addition
NAME				6.2 NAME				,	_ •	_
STREET ADDRESS				6.3 STREE		ESS				

6.4 CITY-ST-ZIP

14. I do hereby certify that the internation supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicates 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 certify 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATO OFFICER OR DIRECTOR

., 4-26-96 (954) 975-8220

CR2E034 (12/95)