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

CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Morticen

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P940000 28254 Indian River let Ski Rentals, Inc. **FILED** 

Jun 22 1998 8:00am

Secretary of State

Principal Place of Business

Mailing Address

1606 In Seloas	tian, FL 32958	1606 Indian Sebastian, f		DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified	
1				4-11-94	
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number Applied Applied Not App	
Suite, Apt	t. #, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired   Statu	
City & Sta 23		City & State		6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fee	
Zip 24	Country 25	Ζφ [ <b>29</b> ]	Country 30	8. This corporation owes or has paid the current year Intangib Personal Property 1ax due June 30. Xyes  No 10. Name and Address of New Registered Agent	
	Name and Address of Cur      HAN A	rent Hegistered Agent	81 Name		
	ELLO, JUAN A 835 19TH PLACE			Cincle L. Hent- dress (P.O. Box Number is Not Acceptable).	
	ERO BEACH FL 32960		83	2550 POLM Boy Road, Ste 20 Paum Bou FL 85 Zip Code 3290	
11. Pursuant office or agent. I	t to the provisions of Sachons 607 tregistered agent, or both, in this Stam familiar with, and accept the of	0502 and 607, 1508, Florida Statu ate of Florida Such change was digations of Section 607,0505, F	tes, the above-paged co	rporation submits his statement for the purpose of changing its registation's board of directors. Thereby accept the appointment as regist	istered
SIGNATURE			It Registered Agent agenators req	pred when reinstatura) DATE	
12.	Signature, typed or posters care of registerer  Of FICERS	agemand Mapp Nove (NO SROTE BILD ONA	1 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	PIRECTOR HELL HEN	<b>=</b> □ DELTTE	1.1 TOLE		Additio
NAME	Cinque Linein	10 21 Ste 209	1.2 NAME '		
STREET ADDRESS	asso paum isau	14000, 015	1.3 STREET ADDRESS		
CITY-ST-ZIP	Asso Parm Bar Parm Bay,	L 32905	1.4 CITY - ST - 7₽P		
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STREET ADDRESS			2.3 STREET ADDRESS		
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NAME expect appoince			3.2 NAME 3.3 STREET ADDRESS		
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ÇITY-ST-ZIP TITLE	<del>-</del>	DELETE	41 TITLE	☐ Change ☐	Addition
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TITLE		☐ DOLFTE	611IILF		Addition
NAME			6.2 NAME	- 06/23/98 07 087 013	V.Y
STREET ADDRESS			63 STREET ADDRESS	***150,(10)	V
CITY-ST-ZIP	and the Mant star in the market of a manufacture	the thin thin stop and smaller	64 CITY-ST-7IP	in Caction 110 07/3Vi). Florida Statutos. Liurthar cartify that the inform	

receive certay may me information supplied with this limit does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this arrived report or suppliemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

4/3/198