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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000046512 (7)

RAHN BAHIA MAR MGMT., INC.

450 E. LAS OLAS BLVD. STE: 700 FORT LAUDERDALE FL 33301 US		450 E. LAS OLAS BLVD. STE. 700 FORT LAUDERDALE FL 33301 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/22/1994	
	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21	# ab.	[26]				65-0500488 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required	
City & State		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	 -	Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent				Г		10. Name and Address of New Registered Agent	
GARDINA, CAROL J				81	Name		
45	O E. LAS OLAS BLVD.			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
1	E. 70 0 PRT LAUDERDALE FL 33301			83			
	INT DAUDENDALE PL 33301			84	City	85 Zip Code	
						FL [T]	
office or nagent. La SIGNATURE	Signature typed or printed name of registered ag			ed Ago		orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered quired when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELET		ITLE		Change Addition	
NAME	ROBERTS, PETER H	נן טננו	1	NAME	}	brange Addition	
STREET ADDRESS	450 EAST OLAS BLVD., STE	700			ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL	. 100		CITY-S	1		
TITLE	VD	☐ D€LE1		TITLE	1-21	☐ Change ☐ Addition	
NAME	ANDERSON, JOHN H		2.2)	IAME			
STREET ADDRESS	450 E. LAS OLAS BLVD., ST	E. 700	2.3 9	TREET	ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL		2.4	CITY-S	ST-ZIP		
TITLE	VT	☐ DELE1	TE 3.1 1	HTLE		Change Addition	
NAME	S TIRK, ROBERT J		3.21	MAME			
STREET ADDRESS	450 E. LAS OLAS BLVD., ST	E. 700	3 .3 S	STREET	ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL			CITY-5	ST-ZIP		
TITLE		☐ DELET	E 4.1 T	ITLE	-	Change Addition	
NAME			4.2	NAME			
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP		DELE		DITY-S	IT-ZIP	Change Addition	
TITLE		☐ DELE1				Change Addition	
NAME				IAME			
STREET ADDRESS					ADDRESS	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP		DELET		HTY-S	JT - ZIP	Change Addition	
TITLE		וון טנוני		TITLE		LI Change LI Addition	
NAME				YAME			
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			6.4 (CITY-S	iT-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.

CIONATURE

RINTARTOR

Robert J. Stirk

4/27/98

954-524-5336

FILED

May 18 1998 8:00am

Secretary of State