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

DOCUMENT # P94000051944 (4)
1. Corporation Name

MIAMI YACHT INTERNATIONAL SURVEYORS, INC.

Principal Place of Business Mailing Address					\$8011 80101 81181 11818 18161 8184 8184 1981
170 N.W. 147 MIAMI FL 331		170 N.W. 147TH STREET MIAMI FL 33168			
				Date Incorporated or Qualified 07/13/1994	3a. Date of Last Report 03/10/1995
2. Principal Pla	ce of Business	2a. Mailing Address	. A 2	4. FEI Number	Applied For
	SOUTHERN DROWARD RE		KW CHECHARD KD.	65-0511477	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	IG FL	City & State	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zio	Country	Zip	Country	8. This corporation has liability for in	
24 333	25 ₂₅	29 33328	30	Florida Statutes X Yes	□No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	agistered Agent
			81 Name		
				ss (P.O. Box Number is Not Acceptabl	6)
2450 N.E. MIAMI GARDENS DRIVE					
SUITE #	MIAMI BEACH FL 33180				
NONIN	MIAMI BEACH PL 33180		84 City		85 Zip Code
11. Pursuant to	the provisions of Sections 607.0502	and £07.1508. Florida Stati	ites, the above named corpora	ation submits this statement for the purp	pose of charging its registered office
or registere	od agent, or both, in the State of Florida h, and accept the obligations of, Section	 Such change was author 	ized by the corporation's board	d of directors. I hereby accept the appo	intment as registered agent. I am
	n, and accept the obligations of, Score	in 607.0505, ridinga Statute	28.		
SIGNATURE -	Signature, typed or probed name of registered agent a	and title if applicable	NOTE Registered Agent signative required	when rains(ating)	Delle
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
THILE	DPST	DELETE	1. 1 TITLE		Change 🔲 Addition
NAME	DREDGE, LOURDES M		1.2 NAME		.
STREET ADDRESS	170 N.W. 147TH STREET		1.3 STREET ADDRESS 9.2	.15 SOUTHERN DRCHA AVIE, FL 83328	COND.
CITY-ST-ZIP	MIAMI FL 33168	F"I DELETE	1.4 CITY-ST-ZIP	AVIE, TC 83328	
THILE		☐ DELFTE	2. 1 TITLE		Change Addition
NAME DIGEET LEGERGE			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	.	
CITY-ST-7IP TITLE		☐1 DELETE	2.4 CHY+ST-ZIP 3.1 THLE		Change Addition
NAME		<u></u>	3 2 NAME		C out ign C victori
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY - ST - ZIP		
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME.		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZiP			4.4 CITY - ST - ZIP		
TITLE		DELFIE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP		Change D Addition
TITLE NAME		L] Detrie	6 1 TITLE		Change C Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
14. I do hereby	certify that the information supplied w	rith this filing is voluntarily fu	64 CITY-ST-ZIP mished and does not qualify fo	r the exemption stated in Section 119.0	07(3)(k), Florida Statutes. I further
certify that	the information indicated on this annua	af report or supplemental an	inual report is true and accurate	e and that my signature shall have the report as required by Chapter 607, Flo	same legal effect as if made under
appears in	Block 12 or Block 13/1 changed, or or	n arr attachment with an adi	dress.	/	

Daytime Phone #