**PROFIT** CORPORATION ANNUAL REPORT 1999

F/V CHARLES DALTON, INC.



DOCUMENT # **P94000056446**1. Corporation Name

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## FILED May 27, 1999 8:00 am Secretary of State

05-27-1999 90011 025 \*\*\*550.00

Principal Place of Business IBBS BALBOA LANE CLEARWATER FL 34616  2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Date Incorporated or Qualded 07/29/1994  2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualded 07/29/1994  2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualded 07/29/1994  2. Principal Place of Business 3. Date Incorporated or Qualded 07/29/1994  2. Principal Place of Business 3. Date Incorporated or Qualded 07/29/1994  3. The Flux Incorporated or Qualded Or Section Se				_			d Pilatij lilj			
CLEARWATER FL 34616  CLEARWATE	Principal Place	e of Business	Mailing Address			1 (901)991 110 1011 1011 1011 1011	11 21119 01111 01011			
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied F   57/29/1994   2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied F   59/32/3021   Not Applied F   59/32/32/3021   Not Applied F   59/32/32/3021   Not Applied F   59/32/32/3221   Not Applied F   59/32/32/3021   Not Applied F   59/32/32/3221   Not Applied F   59/32/3						DO NOT WRITE IN THIS SPACE				
Spring   Place of Business   2a, Malling Address   4. FEI number   Applied F   21   20   Suite, Apt. #, etc.   5uite, Apt. #, etc.							0.011			
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   South, Apt. #, etc.				•						
Suite, Apt. #, etc. 27   City & State 28   City & State 29   City & State 29   City & State 29   City & State 29   Country 20   Country 20   Country 20   Country 20   Country 20   State 30   State	2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	pplied For			
Suite, Apt. #, etc. 27 City & State City & State 28 City & State 29 Country 25 29 29 30 30 30 30 30 30 30 30 30 30 30 30 30	21		26			59-3273021	No	ot Applicable		
City & State  Zip  Zip  Country  3. This corporation owes the current year Intangible Personal Property Tax.  In Name  Personal Property Tax.  In Name  Site BALBOA LIN  CLEARWATER FL 33756  Site City  Site Address (P.O. Box Number is Not Acceptable)  Site Address (P.O. Box Number is Not Acceptable)  Site Address (P.O. Box Number is Not Acceptable)  Site City  FL Sity  FL Sity	Suite, Apt.	#, etc.	— — · · · ·			5. Certifcate of Status Desired				
Zip Country Zip Country 2 9 30	City & State	е	— ·							
28		Country		Country		8. This corporation owes the current year	ntangible			
WATSON, EDWARD 1861 BALBOA LN CLEARWATER FL 33756  18.1 Name  CLEARWATER FL 33756  18.2 Street Address (P.O. Box Number is Not Acceptable)  Registered Agent  Registered Agent	<del>├─</del> ┐ ˙									
WATSON, EDWARD 1861 BALBOA LN CLEARWATER FL 33756  82 Street Address (P.O. Box Number is Not Acceptable)  83 Interest Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code City FL 85 Zip Code City FL 86 Zip Code City FL 87 Zip Code City FL 88 Zip Code City FL 85 Zip Code	<del></del>			<u>'                                    </u>		10. Name and Address of New Registere	d Agent			
WAI SON, EDWARD  1861 BALBOA LN  CLEARWATER FL 33756  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  87 City FL 85 Zip Code  88 City FL 85 Zip Code  88 City FL 85 Zip Code  89 City FL 85 Zip Code  89 City FL 85 Zip Code  80 Zip Code  81 City FL 85 Zip Code  82 City FL 85 Zip Code  83 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  86 City FL 85 Zip Code  87 Zip Code  88 City FL 85 Zip Code  88 City FL 85 Zip Code  89 Zip Code  89 Zip Code  80 Zip Code  80 Zip Code  81 Zip Code  82 Zip Code  83 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  87 Zip Code  88 Zip Code  88 Zip Code  88 Zip Code  89 Zip Code  89 Zip Code  89 Zip Code  80 Zip Code  80 Zip Code  80 Zip Code  81 Zip Code  82 Zip Code  83 Zip Code  84 City FL 85 Zip Code  85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  87 Zip Code  88 Zip Code  88 Zip Code  89 Zip Code  80 Zip Code  81 Zip Code  82 Zip Code  83 Zip Code  84 Zip Code  84 Zip Code  85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  87 Zip Code  87 Zip Code  88 Zip Code  88 Zip Code  89 Zip Code  89 Zip Code  80				81	Name	_				
CLEARWATER FL 33756  83  64 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 register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, hyade or printed name of registered agent and title if approache  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  MAKE  STREET ADDRESS  CITY-ST-ZIP  WATSON, EDWARD  12 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  22 NAME  23 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  33 STREET ADDRESS  34 City ST-ZIP  TITLE  Change  Chan				22	Street Ade					
### City #### City ### City ##				02	Sileer Auc	aress (F.O. Box (40)) Der la Not Acceptable)				
### City	CLE			83						
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  Signature, typed or preted name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE  NAME  STREET ADDRESS CITY. ST. ZIP  TITLE  DELETE  DELETE  1.1 TITLE  DELETE  1.2 Change  AMTSON, EDWARD  1.2 NAME  1.3 STREET ADDRESS CITY. ST. ZIP  CLEARWATER FL 34616  DELETE  2.1 TITLE  DELETE  2.2 NAME  2.2 STREET ADDRESS CITY. ST. ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS CITY. ST. ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS CITY. ST. ZIP  TITLE  AMAME  4.4 CITY. ST. ZIP  TITLE  Change  AMACIN. ST. ZIP  TITLE  AMAGINE STREET ADDRESS CITY. ST. ZIP  TITLE  AMAME  4.4 CITY. ST. ZIP  TITLE  Change  AMACIN. ST. ZIP  TITLE  Change  AMACIN. ST. ZIP  TITLE  Change  AMACIN. ST. ZIP  TITLE  AMAGINE STREET ADDRESS CITY. ST. ZIP  TITLE  Change  Change  AMACIN. ST. ZIP  TITLE  Change  AMACIN. ST. ZIP  TITLE  Change  AMACIN. ST. ZIP  TITLE  Change  Chang	•			84	City		85 . Zip	Code		
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 and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable.				L	,		,			
Signature, typed of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalting)   DATE	office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board or directors, I nereby accept the appointment as registered									
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE DAME STREET ADDRESS CITY-ST-ZIP CHANGE CITY-ST-ZIP DELETE 3.1 TITLE CHANGE STREET ADDRESS CITY-ST-ZIP CHANGE 3.3 STREET ADDRESS CITY-ST-ZIP CHANGE 4.1 TITLE CHANGE 4.2 NAME STREET ADDRESS CITY-ST-ZIP CHANGE 4.3 STREET ADDRESS CITY-ST-ZIP CHANGE 4.3 STREET ADDRESS CITY-ST-ZIP CHANGE 4.3 STREET ADDRESS CITY-ST-ZIP CHANGE 5.1 TITLE CHANGE 4.3 STREET ADDRESS CITY-ST-ZIP CHANGE 4.3 STREET ADDRESS CITY-ST-ZIP CHANGE 4.3 STREET ADDRESS CITY-ST-ZIP CHANGE 5.1 TITLE CHANGE 1.4 CITY-ST-ZIP CHANGE 1.4 CITY	SIGNATURE	Signature, typed or printed name of recistered an	ent and title if applicable. (NOTE: Reg	istered Aper	t signature requir	red when reinstating) DATE		—— }		
TITLE	12.						AND DIRECTO	ORS IN 12		
STREET ADDRESS   1861 BALBOA LANE   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP		D	☐ DELETE	1.1 TITLE			Change	☐ Addition		
CITY-ST-ZIP	NAME	Watson, Edward	i	1.2 NAME						
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3	TITLE						□ Change	☐ Addition		
NAME 6.2 NAME	NAME				( LDBDEGG					
TOWIL .	NAME									

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 suppliemental 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 further 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP