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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P94000056869 (8)						
1. Corporation Name SEA SAIL INCORPORATED							



3. Date Incorporated or Qualified 3a. Date of Last Report

Principal Place of Business Mailing Address

115 WOODLAND RD 115 WOODLAND RD
PALM SPRINGS FL 33461 PALM SPRINGS FL 33461

						00/01/1004	04/24/ 1000		
Prinopal Place of Business     2a. Mailing Address						4. FEI Number 65-0524286	Applied For		
		[26]				00 0024200			Not Applicab
Suite, Apt. #,	etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		7	Additional Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution			O May Be d to Fees
/ip	Country	Zip	Coi	untry	·····	8. This corporation has liability for in	itangible ta		<del></del>
4.	25]	29	30			Florida Statutes  Yes			
	g. Name and Address of Currer			1		10. Name and Address of New Re	gistered	Agent	
				81	Name				
	ider, larry m			82	Stroot Add	ress (P.O. Box Number is Not Acceptable	e)		
	OODLAND RD			02	Stieet Audi	1655 (F.O. DOX Harrison to Hot Foodplates	-1		
PALM S	SPRINGS FL 33461			83					
				84	City			85 Z	p Code
				54	Oity		FL	,   <sup>65</sup>   <sup>2</sup> '	p code
NATURE S	ig ware typed or printed name of registrated again		OTE Registere	d Agen	t signature require	ad when reinstating)	DATE		
	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI			
	medhwilt, Jerry	☐ DELETE	1.1	TITLE	İ	•	L	Change	Addition Addition
	1251 SE A COURT		1	MAME					
LADDRESS	DEERFIELD BEACH FL				ADDRESS				
ST-ZIP		☐ DELETE		DITY-S TITLE	IT - ZIP			Change	☐ Additi
	BIER, STEVE S			NAME					
ET ADDRESS	3601 NW 33RD AVE				ADDRESS				
ST ZIF	LAUDERDALE LAKES FL			CITY-S					
.51 215	\$1	DELETE		TITLE			1	Change	Additi
	SCHNEIDER, LARRY		321	NAME					
LADDRESS	115 WOODLAND RD		3.3	STREE	T ADDRESS				
\$1.70	PALM SPRINGS FL		3.4	CHTY - S	ST - ZIP				
	DIED MICHAEI	☐ DELE1E	4.1	TITLE			ſ	Change	☐ Additi
	BIER, MICHAEL 110 BAYVIEW DR			NAME					
LLADORESS	ISLAMORADA FL				ADDRESS				
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E ADDRESS					ST-7IP				
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14. I do hereby certily that the information 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 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 comporation 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 change 1.1 on a layarchment with an address.

SIGNATURE:

2.2091

305 8767150

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