

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

**\*CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortherm  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

95 APR 19 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P94000060123 (4)**

1. Corporation Name

**A.S.A.P. YACHT DOCUMENTATION AND REGISTRATION, I  
NC.**

Principal Place of Business

**2730 NORTHEAST 30 PLACE  
FT. LAUDERDALE FL 33306**

Mailing Address

**2730 NORTHEAST 30 PLACE  
FT. LAUDERDALE FL 33306**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**08/16/1984**

3a. Date of Last Report

2. Principal Place of Business

**21**

Suite, Apt. #, etc.

**22**

City & State

**23**

Zip

County

**24**

**25**

2a. Mailing Address

**26**

Suite, Apt. #, etc.

**27**

City & State

**28**

Zip

Country

**29**

**30**

4. FEI Number

**65-0524026**

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**AMERILAWYER  
343 ALMERIA AVE.  
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

**JANICE M. SWARTZ-PAINTER**

82 Street Address (P.O. Box Number is Not Acceptable)

**2730 NE 30TH PLACE**

83

84 City

**FORT LAUDERDALE**

**FL**

85 Zip Code

**33306**

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 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. I am familiar with, and accept the obligations of, Section 607.0705, Florida Statutes.

SIGNATURE

*Janice M. Swartz-Painter*  
Signature, typed or printed name of registered agent or officer if applicable

*Janice M. Swartz-Painter*  
Name of Registered Agent (Signature required when new listing)

DATE

**3/28/95**

12. OFFICERS AND DIRECTORS

TITLE

**P**

NAME

**SWARTZ-PAINTER, JANICE M**

STREET ADDRESS

**2730 NORTHEAST 30 PLACE**

CITY - ST - ZIP

**FT. LAUDERDALE FL 33308**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify 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 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.

SIGNATURE:

*Janice M. Swartz-Painter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Janice M. Swartz-Painter**

**3/28/95 305-537-9554**

*President*