

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000069805

1. Entity Name
SOUTH BEACH YACHT SALES, INC.

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90044 035 ***158.75

Principal Place of Business

300 ALTON RD
SUITE 304
MIAMI FL 33139
US

Mailing Address

300 ALTON RD
SUITE 304
MIAMI FL 33139
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0521931

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIETSAK, JAMES F
300 ALTON RD #304
MIAMI BEACH FL 33139

Name
DIANE M. TRAINOR, ESQUIRE
Street Address (P.O. Box Number is Not Acceptable)
9200 S. Dadeland Boulevard, Suite 700
City Miami FL Zip Code 33156

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME PIETSAK, JAMES F.
STREET ADDRESS 556 NE 57TH STREET
CITY-ST-ZIP MAIMI FL 33137 ☒ Delete

TITLE PS
NAME Lazaro Leon
STREET ADDRESS 300 Alton Road, Suite 304
CITY-ST-ZIP Miami Beach, FL. 33139 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VP, T
NAME Roberto E. Damas
STREET ADDRESS 300 Alton Road, Suite 304
CITY-ST-ZIP Miami Beach, FL. 33139 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE D
NAME Ricardo Martinez
STREET ADDRESS 300 Alton Road, Suite 304
CITY-ST-ZIP Miami Beach, FL. 33139 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)