FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000072894 (6)

BOSS LADY CHARTERS INC.

Principal Place of Business

Mailing Address

FILED Jan 23 1997 8:00am Secretary of State



7510 S.W. 53RD COURT MIAMI FL 33143		7510 S.W. 53RD COURT MIAMI FL 33143-5808					
					3. Date Incorporated or Qualified 09/30/1994	3a. Date of La 03/11/199	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	T	Applied For
21		26			65-0537939		Not Applicable
Suite, Apt. # etc.		Suite, Apt. #, etc.	├ - ¬		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	ate	City & State		:	Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zıp	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032, Ftorida Statutes ☐ Yes ☐ No		
24	9. Name and Address of Cu	rent Begistered Agent	30		10. Name and Address of New Reg		
LAIC	R. HECTOR J	Tell Hegisteled Agent	81	Name	10. Harrie at to Addises of Heat He	Jiacolou Agolic	
	R, RECTOR J 55 LE JEUNE ROAD		ļ		from /D O. Day Number in Not Assessed		
SUITE 1107				82 Street Address (P.O. Box Number is Not Acceptable)			
CO	PRAL GABLES FL 33134		83	1			
			84	City	***************************************	FL 85	Zip Code
office or	rregistered agent, or both, in the S	tate of Florida. Such change was	authorized b	y the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of chang t the appointmen	ng its registered it as registered
)	am familiar with, and accept the of	oligations of, Section 607.0505, F	lorida Statute	98.			
SIGNATURE	Signature, typed or printed name of registere	Lagent and tile if approable (NO	TE Registered A	ent signature requ	ured when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
TITLE	D	DELETE	1.1 TITLE			☐ Cha	inge Addition
NAME	IGLESIAS, RAMON		1.2 NAME				
STREET ADDRESS			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL	I Delete	1.4 CITY-			[] 66	- Daddisin
THTLE	D LORIE, YOLANDA	☐ DELETE	2.1 TITLE			Cha	inge L. Addition
NAME STREET ADDRESS	SEAS OUR CODE COURT		2.2 NAME	T ADDRESS			
CHY-ST-ZIP	MIAMI FL		2.4 CiTY				
Title		DELETE	3.1 TITLE			☐ Cha	nge Addition
NAME			3.2 NAME				
STREET ADDRESS	s		3.3 STREE	T ADDRESS			
CITY - ST - 7IP			3.4. CITY	- ST-ZIP			
TIILE		☐ DELETE	4.1 TITLE			Cha	inge
NAME			4. 2 NAM				
STREET ADDRESS	5		4.3 STRE	T ADDRESS			
CITY-S1-ZIP			4.4 CITY		· ·		
TITLE		L DELETE	5 1 TITLE		··	L Chi	ange
NAME			5 2 NAME				
STREET ADDRESS	5			T ADDRESS			
CiTY - S1 - ZiP		DELETE	54 CITY -			☐ Cha	nge Addition
TITLE		[] DETELE	6 1 TITLE	}		L_ Una	inge Lili Addition
NAME OTOGEL ADDRESS			62 NAMI				
STREET ADDRESS				T ADDRESS			
CITY - ST - ZIP	1		6.4 City	ST-ZIP			

14. I do hereby certify that the information supplied with this filling 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 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 strain an address.