

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JUN 30 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000087687 (7)

1. Corporation Name

PONTOON BAY CHARTERS INCORPORATED

Principal Place of Business

8915 SW 17TH TERRACE
MIAMI FL 33165

Mailing Address

8915 SW 17TH TERRACE
MIAMI FL 33165

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/02/1994

3a. Date of Last Report

N/A

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

65-056-8482

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

7. This corporation has liability for intangible tax under S. 129.032, Florida Statutes ☒ Yes ☐ No

8. Name and Address of Current Registered Agent

FROMER, SCOTT C
8915 SW 17TH TERRACE
MIAMI FL 33165

10. Name and Address of New Registered Agent

81 Name

N/A

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

N/A

83

84 City

N/A

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 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 607.0505, Florida Statutes.

SIGNATURE

N/A

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT (SOLE OFFICER)
NAME SCOTT C. FROMER
STREET ADDRESS 8915 S.W. 17TH
CITY-ST-ZIP MIAMI FLA. 33165

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE N/A (FROMER SCOTT C)

1.2 NAME N/A (SOLE OFFICER)

1.3 STREET ADDRESS N/A (EMPLOYEE)

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

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 110.07(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, given an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REMITTED BY MAY 1

\$ Deposited by Bank

FC

4/3/95 (205) 282-4577