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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P94000089703 (0) DOCUMENT # 1. Corporation Name

CRUISIN ON THE BEACH, INC.



Principal Place	of Business	M	Mailing Address				E INDRINDES IND TATUS OLD IN ONLE IN			
537 N ATLANTIC AVE DAYTONA BEACH FL 32118			537 N ATLANTIC AVE DAYTONA BEACH FL 32118							
		·····					3. Date Incorporated or Qualified 12/09/1994		of Last I 04/28/	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	·		Applied For
Suite, Apt. #, etc.		Suite, Apt #, etc			59-3280874			Not Applicable		
22		27	Odne, Apr. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State	9		City & State				6. Election Campaign Financing			00 May Be
23		28					Trust Fund Contribution			ed to Fees
Ζιρ	Country		Zip	Coun	try		8. This corporation has liability for in		x under s	199.032,
24	9. Name and Address of Curre	29		30			Florida Statutes Yes			
	s. Name and Address of Curre	nt negis	tered Agent		81	Name -	10. Name and Address of New Re	gistered .	Agent	
MVAC	A OF DEAT			[	•	Naine				
MYARA, GILBERT 537 N ATLANTIC AVE				Ī	B2	Street Add	press (P.O. Box Number is Not Acceptable	;)		
	ONA BEACH FL 32118			-  -	83					
DAIL	OTAL DENOTITE SETTO									
				18	84	City	-	CI	85 Z	ip Code
11. Pursuant t or register familiar wil	to the provisions of Sections 607.050 ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	2 and 60. ida Such tion 607 (	7.1508, Florida Statute n change was autnorize 0505, Florida Statutes	es, the above ed by the co	e-na erpo	amed corpo iration's bos	ration submits this statement for the purp rd of directors. I hereby accept the appoi	ose of cha ntment as	inging its registere	registered office d agent. I am
SIGNATURE	Signature, typed or printed name of registered agree									
12.	OFFICERS AN			"E. Bigistered A 13,	d	Signa" we re ; pre	ADDITIONS/CHANGES TO OFFIC	DATE	DIDECT	ODC IN 10
TITLE	P		DELETE	1 1 TUT.			ADDITIONS OF ANGES TO OFFIC		Change	Addition
NAME	MYARA, GILBERT		<del></del>	1.2 NAM				L		
STREET ADDRESS	537 N ATLANTIC AVE					ADDRESS				
CiTY-ST-ZIP	DAYTONA BEACH FL 321	18		14001		į				
TITLE			DELETE	2 1 700	E				Change	Addition
NAME				2 2 NAN	ŧE.	İ				
STREET ADDRESS				23 STR	ét I A	DORESS				
CITY - ST - ZIP				2.4 CITY	- 51	· ZIP				
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STREET ADDRESS						ADDRESS				
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TITLE			DELETE	4 4 CHTY 5 1 THTL		118		····	Change	Addition
NAME				5.2 NAM				L	_ unange	T vanial
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CITY-ST-ZIP				5 4 CHY						
TITLE			DELETE	6 1 TrTL		-11			Change	Addition
NAME			•	6.2 NAM				L	_ c.iango	
STREET ADDRESS				6.3 STRE		DORESS				
CITY - ST - ZIP				6 4 CITY		- 1				
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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 of 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 division of the corporation or the report as report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of chapter 607 and that my name additional reports in Block 12 or Block 13 or Block 13 or Block 14 or Block 15 
04-19-96 - 904-239-8334