## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Blo



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000093077 (3)

KEYS WATERCRAFT RENTAL, INC.

## APPROVED AND FILED

1997 SEP 29 AM 9: 42

SECRETARY OF STATE TALLAHASSEE. FLORIDA

9/11/47

Principal Place of Business Mailing Address							I SMANIANAN SIN BANKA MANAN MANIN MAN	II <b>Dafio</b> Idi		
P.O. BOX 564 FT LAUDERDA			P.O. BOX 5648 FT LAUDERDALE FL 33310				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified		ate of Last Re	eport
							12/22/1994	לח	/12/1996	, i
2. Principal P	lace of Business	2a. Mailing	28. Mailing Address				4. FEI Number	-J¥1		plied For
21		26					65-0544600		No	l Applicable
Suite, Apt.	#, etc.	Suite, /	Apt.#, etc.				5. Cortificate of Status Desired		\$8.75 A	
22		27					b. Contineate of status pession		Fee Re	quired
City & State	0	City 8	State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added to	
Zıp	Country	Zip		Cour	ntry		8. This corporation owes or has pa	id the cu		
24	25	29	30				Personal Property Tax due June 30.  Yes No			
	9. Name and Address of Cur-	man a decreased a construction	gent				10. Name and Address of New Re	gistered	Agent	
KOI	PELOWITZ, HARVEY				81	Name				
	SE 3 AVE			-	82	Street Add	ress (P.O. Box Number is Not Acceptab	lo\		
#10	00					511001 2001	less (F.O. Dox Normel is Not Acceptable)			
FT	LAUDERDALE FL 33316				83					
					B4	City		FL	• 1 1	
agent. I a	to the provisions of Sections 607.6 egistered agent, or both, in the Standamiliar with, and accept the ob-	502 and 607.1508 ate of Florida Such ligations of, Sectio	t, Ftorida Statu h change was m 607.0505, F	ites, the ab authorized lorida Statu	ove f by utos	<ul> <li>named corp the corporal</li> </ul>	poration submits this statement for the p tion's board of directors. I hereby accep	urpose o at the app	f changing its pointment as	s registered registered
SIGNATURE	Signature typed or printed name of registered		ale (NC	II Registered	Agri	ni signature requi	ted which reinstating)	DATE		
12.		AND DIRECTORS	The second	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	D D		DETETE	1.1 1(1)			6000023	08	<u> </u>	Addition
NAME	STANTON, DAVID			1.2 NAI			-10/01/9	<del>)</del> 701	10770	17
STREET ADDRESS	2430 W OAKLAND PARK B	LVU		1.3 STF	REF	ADDRESS	****550	.00	****551	0.00
CITY-ST-ZIP	FT LAUDERDALE FL 33311		- OF 1625	1.4 CI1		1-7P				
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NAME				22 NA1						
TREET ADDRESS						ADDRESS				
CITY+ST-ZIP	·		DELFTE	2. 4 CII		1 - Z(F)			Change	Addition
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MAME				3.2 NAI						
STREET ADDRESS						ADDRESS				
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NAME CTOTET ADDOLGO						ADDOLGO				
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP TITLE			DELLIE	44 CIT					Change	Addition
NAME				5.2 NA6					Cara Change	
STREET ADDRESS						ADDRESS				ļ
CITY-ST-ZIP				5.4 CIT		i i				_
TITLE			DILLETE	6.1 THE					Change	Addition
NAME				6 2 NA						1 2 X
STREET ADDRESS						ADDRESS			7	Mai.
City-St-ZIP				6.4 CIT		· I			બ	i
14 Ldo beret	by certify that the information supp	hed with this filing	does not qua	dy for the c	OVE	motion stated	in Section 119.07(3)(i), Florida Statute	s. I furthe	r certify that t	the
informatio I am an o	n indicated on this armual report of flicer or director of the corporation	or supplemental an or successor or	inual report is trustee empo	true and ac wared to ex	cou xeci	rale and that ute this repor	my signature shall have the same legant as required by Chapter 607, Horida S	i effect as tatules; a	s if made und ind that my ni	fer oath, that amo