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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mörtham 🧖

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500000054 (3)

MIAMI LAUNCH & TOWING, INC.

Principal Place of Business

1835 PURDY AVE MIAMI BEACH FL 83139

Mailing Address

1835 PURDY AVE MIAMI BEACH FL 33139-1425

FILED Apr 21 1997 8:00am Secretary of State



									,	3. Date Incorporated or Qr 01/03/1995			te of Last F)1/1996	of Last Report 1/1996	
1:	Principal P	lace of Busin	ness	2a. M	2a. Mailing Address					4. FEI Number			TA	pplied For	
21	21				26					65-0549956			N	ot Applicable	
Sulte, Apt. #, etc.				St	Suite, Apt. #, etc.					- O-486-1 4 O-1 - D-1			\$8.75	Additional	
22				27	27					5. Certificate of Status Des	irea	ш	Fee R	equired	
City & State				Ci	City & State					6. Election Campaign Fina	ncina		\$5.00	May Be	
23					28				Trust Fund Contribution				to Fees		
	Zip		Country	Zi	Zip _ Cour			/	8. This corporation has liability for intangible tax under s. 199.03.					s. 199.032.	
24			25	29	30				Florida Statutes Yes No						
g, Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent							
CAPITAL CONNECTION, INC.								81 Name							
417 E VIRGINIA STREET								82 Street Address (P.O. Box Number is Not Acceptable)							
SUITE 1								Street Address (P.O. Box Number is Not Acceptable)							
TALLAHASSEE FL 32301								83							
	٠														
							84			en e		FL		Code	
441	. Pursuant	to the provis	ions of Sections 607.05	02 and 607.	1508, Florida Statut	es, the a	above	e-named	corpor	ation submits this statement i's board of directors. I hereb	for the pi	urpose of	changing i	ts registered	
٠.	agent. La	registered ag ım familiar wi	ent, or both, in the Stat th, and a ccept the obli	e of Florida. pations of, Se	Such change was a action 607,0505. Fil	autnorize orida Sta	ea by atutes	y the corp s.	poration	i's board of directors. I hereb	у вссер	t the appo	ointment as	registered	
- RII	GNATURE		•	,	•										
.01	OFFICIAL	Signature, typed	or printed name of registered a	gent and title if ap	plicable. (NOT	nt signature	required	when reinstating)		DATE					
12. OFFICERS AND DIRECTORS							13,			ADDITIONS/CHANGES TO	OFFIC	ERS AND	DIRECTOR	RS IN 12	
100	Æ.	ST			DELETE	1.1 1	ITLE						Change	☐ Addition	
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	r-ST-ZIP														
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NAN	E 15 .					6.2 N	AME								
STR	EET ADDRESS	•				6.3 \$	TREET.	ADDRESS							
City-S1-2IP						6.4 C	17Y-S1	1-ZIP							
	13.1	477 -11 -1													

I do 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 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 of 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 schanged or on an attachment with an address.