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

PROFIT CORPORATION **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000002811**1. Corporation Name

LUXURY YACHT AND REAL ESTATE CONNECTIONS, INC.

Principal Place	e of Business	Mailing Address	Mailing Address					
660 TENNIS CL	UB DR	PO BOX 70190						
UNIT J-305		UNIT J-305						
FT LAUDERDAL	E FL 33311	FT LAUDERDALE FL 33307	FT LAUDERDALE FL 33307			DO NOT WRITE IN THIS SPACE		
		US				3. Date Incorporated or Qualifed		
						01/09/1995		
2 Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	- 7	Applied For
21		 -1	26			65-0567090	1	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.75	Additional
		27	¬			5. Certifcate of Status Desired		Required
City & Stat			City & State			6. Election Campaign Financing	\$5.0	0 May Be
¬ ′		28	¬ '			Trust Fund Contribution Added to Fees		
Zip Country			Zip Country			8. This corporation owes the current ye		
				1		Personal Property Tax.	∏ Yes	□No
24	25		30			10. Name and Address of New Regist		
	9. Name and Address of Currer		R	11	Name	IV. Name and Address of New Regist	orea Agent	
COPP, WHITNEY D				`` `	Manie	,		
				2 :	Street Addre	ess (P.O. Box Number is Not Acceptable)		_
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UNIT J-305			8	13				
FT LAUDERDALE FL 33311			R	14 (City	7 (2 × 18 2 3) (3 × 3 × 3 × 3 × 3 × 3 × 3 × 3 × 3 × 3		p Code
			1 "		-			´
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 of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of th								
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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE		Alexander	Ď			when reinstation) DA	TE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered 12. OFFICERS AND DIRECTORS 13.					ignature required	ADDITIONS/CHANGES TO OFFICER		TOPS IN 12
12.		DELETE	13.			ADDITIONS/CHANGES TO OFFICE	Chang	
TITLE	PST	□ pereie				•	_ பாவி	0
NAME COPP, WHITNEY D								ļ
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CITY-ST-ZIP	FT LAUDERDALE FL 33311		1.4 CITY-	-ST-Z	ZIP			
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NAME			2.2 NAME	Ε	8			
STREET ADDRESS			2.3 STRE	ETAL	DORESS			
CITY-ST-ZIP		• •	2.4 CITY	/-ST-2	ZIP	,		
TITLE		☐ DELETE	3.1 TITLE				Chang	e 🔲 Addition
NAME			3.2 NAME	E				
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177			3.4. CITY					
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STREET ADDRESS		•	4.3 STRE					ļ
CITY- ST- ZIP	. *		4.4 CITY		<u>7</u> 1P		Chang	a FT Addition
TITLE		☐ DELETE	5.1 TITLE				☐ Chang	e 🖺 Addition
NAME			5.2 NAME					
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CITY-ST-ZIP	857		5.4 CITY	-ST-Z	ZIP			
TITLE		☐ DELETE	6.1 TITLE		Ī		☐ Chang	e 🔲 Addition
NAME	[- 평양 - 11 / 1 / 1		6.2 NAME	E				ļ
STREET ADDRESS			6.3 STRE	EETAC	DDRESS			ĺ
STREET AUDICESS			1					

14. I 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 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 on an attachment with an address, with all other like empowered.

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90058 024 ***150.00