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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500003760 (2)

Country

9. Name and Address of Current Registered Agent

25

FELDMAN, MARC H

3908 26TH ST. WEST

CAPTAIN JOHN BOAT COMPANY

	Principal Place of Business Mailing Address P.O. BOX 276 CORTEZ FL 32415 P.O. BOX 276 CORTEZ FL 32415		(1801/1804; 204 1850) BAIAH BOJIN BBAIN BOAN BOAN BOAN BOAN ABAUD HANA KODIR B					
			3. Date Incorporated or Qualified 01/12/1995	3a. Date of Last 05/01/1996				
9. 9.	2. Principal Place of Business	2a. Mailing Address 26	4. FET Number 65-0587589					
	Sulte, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	□ \$8.75 Fee				
,	City & State	City & State	6. Election Campaign Financing	\$5.0				

Zip

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FILED May 05 1997 8:00am Secretary of State

Date of Last Report

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Bell, Calvin E.

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

Yes No

BRAI			1 . !	0.40	3	424	INVE	W				
			83	3]
			84	City	C014		<u>-</u>		FL	85 Zip (Code .	1
44 Purculant	to the provisions of Sections 607.0502 and 607.1508	Elorido Statutas	the obo				nite this states	ant for the n			1215	4
office or r	egistered agent, or both, in the State of Florida. Suc	h change was auth	norized b	by the co	prporation	's board o	of directors. I h	rereby accept	the app	changing it pintment as	registered	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 60, 2005, Florida Statutes.											_	
SIGNATURE Signature, typod or protect among registered agent and told of applicable / (NOTE Projectered Agent's gnature required when revisitating); DATE												
12.	OFFICERS AND DIRECTORS	INOTE N	13.	geni signar	urc requied v		ONS/CHANGE	S TO OFFICE	RS AND	DIRECTOR	S IN 12	16
TITLE	D	DELETE	11 111LE		Т	7,00171	Oneyorando	-0 10 011 101	1107110	Change	Addition	90/0
NAME	BELL, CALVIN E		1.2 NAME									1.
STREET ADDRESS	4600 124TH ST. WEST		1.3 STREET ADDRESS		,							8
CITY-ST-ZIP	CORTEZ FL 34215		1.4 CITY -		´							00E03/
TITLE		DELETE	217011							Change	Addition	
NAME			2 2 NAME									
STREET ADDRESS				: 1 addres:	,							
CITY-ST-ZIP			2 4 CITY									
TITLE		DELETE	31 THLE		 					Change	Addition	1
NAME			3.2 NAME									
STREET ADDRESS			3 3 S1RE	ET ADDRES	s							
CITY-ST-ZIP			3.4. C(1Y-	- S1 - ZIP								
TITLE		DELETE	4.1 TITLE							☐ Change	Addition	1
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CITY-ST-ZIP			4.4 CITY-	\$1-ZIP	<u> </u>							
TITLE	•	DELETE	5 1 TITLE							Change	Addition	1
NAME			5.2 NAME									
STREET ADDRESS			5.3 STREE	1 ADDRES	s							
CITY-ST-ZIP			5.4 CITY-	S1-ZIP								
TITLE		DELETE	6.1 TITLE							☐ Change	Addition	1
NAME			6.2 NAME									
STREET ADDRESS	s		6.3 STREE	T ADDRES	s							
CITY-ST-ZIP			64 CITY-									
14. 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 to 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.												

Country

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