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

FILED Apr 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS DOCUMENT #**1. Corporation Name P95000004132 (3) DIE KREUZEN CHARTERS, INC. Principal Place of Business Mailing Address 3975 DOUGLAS RD 3975 DOUGLAS RD COCONUT GROVE FL 33133 **COCONUT GROVE FL 33133** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/17/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0548020 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zφ 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYS ST, 105 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 Zip Code 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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1 1 TITLE TITLE **ZOE URBANEK JOHNSON** NAME 1.2 NAME 3975 DOUGLAS RD 1.3 STREET ADDRESS STREET ADDRESS **COCONUT GROVE FL 33133** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE JOHNSON, JOHN M 2.2 NAME 3975 DOUGLAS RD STREET ADDRESS 2.3 STREET ADDRESS **COCONUT GROVE FL 33133** 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 3 1 TITLE Change 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Addition DELETE Change 4.1 TITLE TITLE 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

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 for the receiver or frustee 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.

5.4 CITY-ST-ZIP

6 3 STREET ADDRESS 64 CITY-ST-ZIP

6.1 TITLE

62 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE NAME

DELETE

305-673-4600

Change

Addition