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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500005027 (4)

FILED Mar 27 1998 8:00am Secretary of State

SCOOZI BEACH INC.					
				T HARITARA DIA TANAN ARAM ARAM ARAM ARAM	IBIB) BIIII BIIII IIII IIII III III
Principal Place		Mailing Address			
2075 N.E. INDIAN RIVER DR. 2075 N.E. INDIAN RIVER DR JENSEN BEACH FL 34957 JENSEN BEACH FL 34957			R.		
US US				DO NOT WRITE IN TH	S SPACE
				3. Date Incorporated or Qualified	
				01/17/1995	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0545186	Not Applicable
Suite, Apt.	#, OC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	3	City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Current	Registered Agent		10. Name and Address of New Registers	d Agent
	OKE, JOSEPH F		81 Name		
2075 NE INDIAN RIVER DR			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
JEN	ISEN BCH FL 34957		83		
			63		
			84 City	F	85 Zip Code
11. Pursuant I	a the provisions of Sections 607,0502	and 607 1508 Florida Statutes	s, the above-named corp	poration submits this statement for the purpose	of changing its registered
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 families with, and accept the obligations of Section 607.0505, Florida Statutes.					
	TV a logates The doing	TREAS	WRJER	ROBERT S. MUZZO	2-12-90
SIGNATURE	Signature typed or printed name of regions of agent		Registered Agent signature require	ed when reinstating) DATE	200
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	CDORE IDSEPT E	☐ DELETE	1.1 TITLE		Change Addition
NAME	CROKE, JOSEPH F 2075 NE INDIAN RIVER DR		1.2 NAME		
STREET ADDRESS	JENSEN BCH FL		1.3 STREET ADDRESS		
CITY-\$1-ZIP	V V	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	CROKE, JOHN	[] DECENT	2.1 HILE 2.2 NAME		Cloude Divodition
STREET ADDRESS	2075 NE INDIAN RIVER DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	JENSEN BCH FL		2.4 CITY - ST - ZIP		
TITLE	\$	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	CRESENZI, WALTER	- -	3.2 NAME	•	
STREET ADDRESS	2075 NE INDIAN RIVER DR		3.3 STREET ADDRESS		1.
CITY-ST-ZIP	JENSEN BCH FL		3.4. CITY - ST - ZIP		
TITLE	T	☐ DELETE	4.1 TITLE		Change Addition
NAME	MOZZO, ROBERTS		4. 2 NAME		
STREET ADDRESS	2075 NE INDIAN RIVER DR		4.3 STREET ADDRESS		1
CITY - ST - ZIP	JENSEN BCH FL		4.4 CiTY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		ł
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		FT NECTIF	6.1 TITLE		Change Addition
NAME CTOCCT ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP	adify that the information a warling with	this filing door not qualify for	6.4 CITY-ST-ZIP	Section 110.07(2)(i) Florida Statutos, Hurther	sartify that the information

14. I nereby 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.

SIGNATURE: Roberts My

ROBERTS MUZZO

3-27-98

561-125-0700