

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90231 027 ***150.00

DOCUMENT # P95000010659

1. Entity Name

The Flying Dutchman Charter CO., Inc.



DO NOT WRITE IN THIS SPACE

11016524

2. Principal Place of Business

108 Toll Gate Ln
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 385
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Islamorada FL 33036
Zip Country

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Islamorada FL 33036
Zip Country

4. FEI Number

65-0551064

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Oscar Wijtenburg

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

108 Toll Gate Ln

City

Islamorada

FL

Zip Code

33036

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

President

Oscar Wijtenburg

108 Toll Gate Ln

Islamorada FL 33036

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

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CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with or without other like information.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oscar Wijtenburg President

Date

Daytime Phone #

4-22-03 305 664 5370

CR2E034B (12/02)