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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000014301 (2)

NAUTICAL CASTAWAYS, INC.

Principal Place of Business Mailing Address						OUTS FARDA DIDOU AFFIR DUIDI DIO IODI	
111 SW 23RD ST. 111 SW 23RD ST.							
BAY J BAY J					DO NOT HIDITE IN THIS SDAGE		
FT. LAUDERDALE FL 33315 FT. LAUDERDALE FL 33315 US					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified		
•		00			02/20/1995		
2. Principal Place of Business 2a. Mailing Address			· · · · · · · · · · · · · · · · · · ·	- 	4. FEI Number	Applied For	
21 Culta Act					65-0578822	Not Applicable	
Suite, Apt. #, etc.						\$8.75 Additional	
27					5. Certificate of Status Desired	Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23			1			Added to Fees	
Zip	Country	Zip	Counte	У	8. This corporation owes or has paid		
24 25 29 30 30 8. Name and Address of Current Registered Agent			[30]		Personal Property Tax due June 30 10. Name and Address of New Regis		
				Name	10. 11		
1117 MANDARIN ISLE			_	1 0: (41)	(0.0. 5. 10. 1. 11. 1. 11. 11. 11.		
FT. LAUDERDALE FL 33316			8	Street Addr	ress (P.O. Box Number is Not Acceptable)	
			8:	3	·		
			84	l cau		ar Zin Codo	
			6	City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Stalutes, the above-named of					poration submits this statement for the pur	pose 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, typicd or printed name of registered ag	post and tale if applicable (NO ND DIRECTORS		gont signature requir	red when reinstating)	DATE DC AND DIDECTORS IN 10	
12.	D	DELETE	13.	Т	ADDITIONS/CHANGES TO OFFICE	Change Addition	
NAME	BONDS, CULVER L		1.2 NAME				
STREET ADDRESS	1117 MANDARIN ISLE			1 ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33315		1.4 CITY-	\$T-ZIP			
TITLE	D	DELETE	2.1 TITLE			Change Addition	
NAME	BONDS, LUCIE Y		2.2 NAME				
STREET ADDRESS	1117 MANDARIN ISLE		2.3 STREE	1 ADDRESS			
			2. 4 CITY	-ST-ZIP	·		
TITLE		☐ DELETE	3 1 TITLE			Change Addition	
NAME			3.2 NAME	i			
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE	·ST-ZIP	·	Change Addition	
NAME		- peccie	4.1 MAM			C Outrigo C Symptotical	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY-	1			
TITLE		DELETE	5.1 TITLE	0, 2,,		Change Addition	
NAME			5.2 NAME	1			
STREET ADDRESS			5 3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-	S1-ZIP			

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 intachment with an address.

1/19/20

952-769-987

FILED

May 06 1998 8:00am

Secretary of State