## 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

P95000027847 (9) DOCUMENT #

**FILED** Feb 11 1998 8:00am Secretary of State

<b>B</b> ATTE	ERY SHACI	K II, INC.								
Principal Place of Business Mailing Address										
100650 OVERSEAS HIGHWAY 100650 OVERSEAS HIGHWAY										
KEY LARGO FL 33037 KEY LARGO FL 33037							DO NOT WOLFE IN THIS	00405		
							DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
							04/07/1995			
2. Principal f	Place of Busine	ess	2a. Mailing Address	2a. Mailing Address			4. FEI Number	TA	Applied For	
21			26				65-0574656	· ·	lot Applicable	
Sulte, Apt.	. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	<b>4</b> - · · · •	Additional	
22	<del></del>		27						Required	
City & Stato			City & State				6. Election Campaign Financing	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip		Country	Zrp Country			·	B. This corporation owes or has paid the cu		ntangible	
24	12	25	29	30	,		Personal Property Tax due June 30.		□ No	
		Registered Agent	·			10. Name and Address of New Registered Agent				
GELBER, JEROME B						Name				
BUTTÖNWOOD BAY APTS (UNIT L2)					82	Street Add	dress (P.O. Box Number is Not Acceptable)			
		EAS HIGHWAY			83					
K	ey largo f							-		
					84	City		<b>85</b> Zip	Code	
44 Duramont	to the provisio	one et Solione 607 8502	and COV 1500 Florido Sta	lutes the s	boug	named cor	FL	f changing	ite registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1509. 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 Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of Section 607.0505, Florida Statutes.										
agent. Lam familiar with and accept the obligations 607.0505, Florida Statutes.										
SIGNATURE	Signature, typed o	or printer name of registered agent	I and title if applicable (N	OTE: Registere	d Ager	nt signalura requ	ired when reinstating) DAY	10	— <del>—</del> — I.	
12.		OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS ANI	DIRECTO	RS IN 12	
TITLE	D	//	DELETE	1,1 1	TLE			☐ Change	Addition	
NAME		//JEROME B	•	1.2 N	1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS		OVERSEAS HIGHWAY		1.3 \$						
CITY-ST-ZIP	KET LAH	RGO FL 33037	Driett		ITY-SI	r- ZiP		170		
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CITY-ST-ZIP TITLE	<del> </del>		☐ DELET <b>E</b>	31 TI		1-2Ir		Change	Addition	
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TITLE			DELETE	4 1 TI	TLE			Change	Addition	
NAME				4. 2 N	AME	1				
STREET ADDRESS				4.3 ST	IREETA	ADDRESS				
CITY-ST-ZIP	<b></b>				TY-ST	- ZIP				
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TITLE	1		DELETE	6.1 11				L. Change	Addition	
NAME	1			6.2 N/		1 Donne				
STREET ADDRESS						ADDRESS			1	
CITY-ST-ZIP	Certify that the	information cumplied with	h this filing does not qualify		IV-SI		Section 119 07/31(i) Florida Statutes I (urther or	artify that the	a intermetion	

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther certify that the informatio indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the sarrie 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 307, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: