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Block 12 or Block 13 if changed, or on an attachment with an address

PROFIT DUORIDA DEPARTMENT OF STATE **CORPORATION** FILED Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1**9**98 98 JUN - 5 PM 3: 35 P95000044624 (1) DOCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA RALPH'S BOAT & MOTOR WORKS, INC. Principal Place of Business Mading Address 612 S. SYLVAN DRIVE 612 S. SYLVAN DRIVE BRANDON FL 33510 BRANDON FL 33510 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/01/1995 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3325235 Not Applicable Suite, Apt. #, etc Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П Trust Fund Contribution Added to Fees 28 Ζίρ Country Zin Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 ALMIROLA, RAFAEL JR. Bobbi Almirola 612 S SYLVAN DR. Street Address (P.O. Box Number is Not Acceptable) 82 BRANDON FL 33510 83 Zip Code **3351** ω 84 City Brandon 11. Pursuant to the previsions 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 5/26/98 SIGNATURE (NOT) Registered Agout signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. K DELETE Change Addition TITLE 1.1 TITLE **ALMIROLA, RAFAEL JR.** NAME 1.2 NAME 612 S SYLVAN DRIVE STREET ADDRESS 1.3 STREET ADDRESS **BRANDON FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE President Change Addition TITLE 2.1 III E NAME **ALMIROLA, BOBBI** 22 NAME **612 S SYLVAN DRIVE** STREET ADDRESS 2.3 STREET ADDRESS **BRANDON FL** 2. 4 CITY - ST - ZIP CITY-ST-ZIP Vice President Change TITLE DELETE 3.1 TITLE Addition Almirola, Robert NAME 3.2 NAME 4546 W Knox St STREETADORESS 3.3 STREET ADDRESS 400002552904 CITY-ST-ZIP 3.4. CHTY-ST-7IP 06/09/98--01063 DELETE 4 1 1111.6 TITLE ****150.00 NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(TY - ST - Z(P DELFTE Change Addition TITLE 5.1 TO LE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - S1 - ZIP CITY-ST-ZIP DELETE Change 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP 14. 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 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

11/29/90

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