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 # P95000046019 (2)

CHRISTENSEN YACHTS, INC.

FILED Feb 16 1998 8:00am Secretary of State



							F ilis Black Co rd lands file 1881
	ce of Business	Mailing Address				1911/ 9EM WENT BRITE BI	1 M M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1318 SOUTHEAST 2ND AVENUE 1318 SOUTHEAST 2ND AVE FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 333							
					DO N	DO NOT WRITE IN THIS SPACE	
Ì					3. Date Incorporated or		JOI NOE
f					06/14/1995		
2. Principal I	Place of Business	2a. Mailing Address	. Mailing Address		4. FEI Number		Applied For
21		26			<u>93-11</u> 81535		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status D	esired	\$8.75 Additional
22		27		6. Certificate di Status D	esired LJ	Fee Required	
City & State		City & State		6. Election Campaign Fir		\$5.00 May Be	
Zip	Country Ztp Cour			Trust Fund Contribution		Added to Fees	
24	<u>⊢</u> , ′		├ ─¬	ntry	8. This corporation owes		
24	25 9, Name and Address of Curre	29 Ant Registered Agent	30	-	Personal Property Tax 10. Name and Address of		∐ Yes ∐ No
RI						I New Registered	Agent
BRADY, JAMES C 1318 SOUTHEAST 2ND AVENUE				81 Name			
FORT LAUDERDALE FL 33316				82 Stree	LAddress (P.O. Box Number is Not	Acceptable)	
I ALL PARELINARE LE 000 IO				83			
				64 City		FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	n02 and 607 1508. Florida	Statutes the st	voue name	d corporation submits this statemen	FL	of observing the engineered
office or	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the obli	le of Florida Such change	was authorized	by the co	rporation's board of directors. Ther	eby accept the ap	pointment as registered
	am lamilial with, and acceptine obsi	gations of, Section 607.050	J5, Florida Stati	ites.			
SIGNATURE	Signature, typed or printed name of registered in	Best and title if about able	(NOTE: Banktered	Agent signal:	re required when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES		ID DIRECTORS IN 12
TITLE	P	DELET		LE		70 0111021101111	Change Addition
NAME	CHRISTENSEN, DAVID		1.2 NA	ME			
STREET ADDRESS	4400 COLUMBIA WAY			REET ADDRESS			
CITY-ST-ZIP	VANCOUVER WA 98661			Y-ST-ZIP	}		
TITLE	ST	DELET					☐ Change ☐ Addition
NAME	WITHEE, PATRICIA M		2.2 NA	ME			• —
STREET ADDRESS	400 COLUMBIA WAY		2.3 \$11	REET ADDRESS			
CITY-ST-ZIP	VANCOUVER WAY WA 9866	31	2.4 01	Y-ST-ZIP			
TITLE		DELET					Change Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 STF	EFT ADDRESS			
CITY-ST-ZIP			3 4. CI	Y-ST-ZIP			
TITLE		DELET					Change Addition
NAME			4 2 NA	ME.			
STREET ADDRESS			4.3 STA	EET ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y - ST - 7(P			
TITLE		DELETI					☐ Change ☐ Addition
NAME			5.2 NAI	Æ			
STREET ADDRESS			5.3 STA	EE1 ADDRESS			
CITY+ST-ZIP				7-ST-ZIP			
TITLE		DELETI					Change Addition
NAME			6.2 NA	A E			
STREET ADDRESS			6.3 STH	EET ADDRESS			İ
CITY-ST-ZIP				/-ST-7IP			
	pertify that the information supplied v	with this filling does not aug			ed in Section 119 07(3)(i) Florida S	tatutos I furiber o	ertify that the information

4. 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 eath; 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.

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2/2/98