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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000050954

R & L SI	KI BOATS, INC.						
Principal Place	e of Business	Mailing Address					itt dåten lalat attet atat tabt
1204 NW 7TH ST 1204 NW 7TH ST							
BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426							
						DO NOT WRITE IN THIS S	PACE
						3. Date Incorporated or Qualifed 06/28/1995	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For
21	26	<u> </u>			65-0593516	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	¬ '''			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		City & State					
City & State	е	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Coun			8. This corporation owes the current year Intai	ngible
24	25	29	30			Personal Property Tax.	☐Yes ☐No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered A	gent
				81 Na	me		
ROY, RONALD R 1204 NW 7TH ST				82 St	oot Addr	ess (P.O. Box Number is Not Acceptable)	
				<b>1</b>	oot Addi	COS (1.0. BOX Italinool to Italinoopeasio)	1 4991 To 101 Pits 521
BOYNTON BEACH FL 33426			Ī	83			
			Ī	84 Ci	у	FL	85 Zip Code
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was au	uthorized	by the o	ned corporation	oration submits this statement for the purpose of con's board of directors. I hereby accept the appoint	hanging its registered ment as registered
SIGNATURE							
010117110112	Signature, typed or printed name of registered ag		Ť	Agent sign	iture required	d when reinstating) DATE	
12.		ND DIRECTORS	13.		<del></del> -	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	P	☐ DELETE	1.1 TITLE			and the control	☐ Change ☐ Addition
NAME	1101, 11010 22 11		1.2 NAJ	ΜE		·	
STREET ADDRESS	120111111111111111111111111111111111111		1.3 STF	REET ADD	RESS	* · · ·	`}
CITY-ST-ZIP	A-ST-ZIP BOYNTON BEACH FL 33426 14			Y-ST-ZIP			
TITLE .	☐ DELETE 2.1		2.1 TIT	Æ		•	☐ Change ☐ Addition
NAME	2.2		2.2 NA	ME			
STREET ADDRESS			2.3 STREET ADD		RESS		
CITY-ST-ZIP		2.		2.4 CITY-ST-ZIP		·	•
TITLE .			3.1 TIT	.E			☐ Change ☐ Addition
NAME	32		3.2 NA	νŧΕ			
STREET ADDRESS			3.3 STI	3 STREET ADDRESS		The second state of the se	, 1299, oth 26 30,6 20
CITY-ST-ZIP	ABBALGO!		3.4. CD	.4. CITY-ST-ZIP			で課題を開発する
TITLE		☐ DELETE	4.1 ТТ			The state of the second of the	☐ Change ☐ Addition
NAME			4.2 NA	ME			

CITY-ST-ZIP 14. 1 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 en an attachment with an address, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

GNING OFFICER OR DIRECTOR

DELETE

☐ DELETE

**FILED** 

Feb 11, 1999 8:00am

**Secretary of State** 

02-11-1999 90013 019 \*\*\*165.00

Change

☐ Addition

☐ Addition