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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 06 1997 8:00am

Secretary of State

DOCUMENT # P95000086191 (0)

CARIBBEAN WATERSPORTS SERVICES, INC.

Principal Place 36 SUNSET RO KEY LARGO FO		Mailing Address 36 SUNSET ROAD KEY LARGO FL 33037-20	08		
				3. Date Incorporated or Qualification 11/07/1995	od 3a. Date of Last Report 04/23/1996
· ·	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Sulte. Apt. #, etc.		Suite, Apt. #, etc.		65-0622952	Not Applicable
22		h1	[27]		\$8.75 Additional Fee Required
City & State		City & State	web to the commence of the com		
23		28		Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Oountry	8. This corporation has liability	for intangible tax under s. 199.032,
24	25	[29]	30	Florida Statutes	Malyes □ No
ļ	9, Name and Address of Currer	it Registered Agent	81 Name	10. Name and Address of New	Registered Agent
	LEN, RUSSELL H ESQ.		OI Name		
99228 OVERSEAS HIGHWAY KEY LARGO FL 33037			82 Street Add	dress (P.O. Box Number is Not Acce	plable)
, KEI	EARGO FE 3303/		83		
			64 0		
			84 City		FL 85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE					ne purpose of changing its registered ocept the appointment as registered
12.	Signature, typed or printed nank of registered age OFFICERS AN		TI Registered Agent signature required 13.		FICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TOLE	ADDITIONS/CHANGES TO OF	Change Addition
NAME	DARRELL MCCULLOUGH		1.2 NAME		
STREET ADDRESS	36 SUNSET ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	KEY LARGO FL	<u></u>	1.4 C(TY+S1+Z(P		
TITLE	ST	☐ DELETE	2.1 1111.6		Change Addition
NAME	JEAN MCCULLOUGH		2.2 NAME		
STREET ADDRESS	36 SUNSET ROAD KEY LARGO FL	•	2.3 STREET ADDRESS		r.
CITY-ST-ZIP TITLE	KET DANGO FL	DELETE	2. # CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		C3 Meet	3.2 NAME		Change [_] Addition
STREET ADDRESS			3.3 STREET ADDRESS	1	
CITY-ST-ZIP			3 4. CITY - ST - ZIP		
TITLE		☐ DELE1E	4.1 117LF		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DECENT	4.4 CITY-S1-ZIP		
TITLE		☐ DECETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME		}
CITY-ST-ZIP		•	5.3 STREET ADDRESS 5.4 CITY - ST- ZIP		
TITLE		☐ DELF1E	6.1 TITLE		Change Addition
NAME			6.2 NAMI		E manage E Manufall

14. I do 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 his unnual 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 directed of the corporation or he regely) 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, plon as attachment with an address.