2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 30, 2002 8:00 am Secretary of State P95000093223 DOCUMENT # 1. Entity Name 04-30-2002 90111 039 ***150.00 SUNSET KEY WATER SPORTS, INC. Mailing Address Principal Place of Business 261 FRONT STREET 261 FRONT STREET KEY WEST FL 33040 KEY WEST FL 33040 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0637859 Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GRASSI, DENNIS J Street Address (P.O. Box Number is Not Acceptable) 261 FRONT ST KEY WEST FL 33040 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Delete TITLE TITLE NAME GRASSI, DENNIS J NAME STREET ADDRESS STREET ADDRESS 261 FRONT ST CITY-ST-ZIP KEY WEST FL 33040 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME YAWORSKI, GARY W NAME STREET ADDRESS 261 FRONT ST STREET ADDRESS CITY-ST-ZIP KEY WEST FL 33040 CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

FILED