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PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

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FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1997 8:00am

Secretary of State

(96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000035323 (0)

CORPORATE YACHT MANAGEMENT, INC.

Mailing Address Principal Place of Business 4731 N 35TH ST 4731 N 35TH ST HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-2213 3a. Date of Last Report 3. Date Incorporated or Qualified 04/22/1996 FEI Number 2. Principat Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Ζip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No Fiorida Statutes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 City 84 Zip Code 85 •11. Pursuant to the provisions 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. I hereby accept the appointment as registered agent. Lam farminar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agen, and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. **PSTD** Change Addition TITLE DELETE 1.1 TETLE FARBSTEIN, DIANE NAME 1.2 NAME 4731 N 35TH ST 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 2.4 City-St-ZiF Change DELETE 3 1 TITLE Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADORESS 3.4. CITY - ST-ZIP CITY - ST - 7/P Change Addition DELETE 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 51 TITLE NAME 52 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-Z-P 54 DITY-ST-ZIP DELETE Addition 61 TITLE <u>Change</u> TITLE 5000020755 NAME 6.2 NAME -02/03/97--01023--046 STREET ADDRESS 6.3 STREET ADDRESS ***165.00

6.4 CITY - ST - ZIP

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 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 directly of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

k•13 if changed, or on an attachment with an address