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 # P96000041299 (4)

OUTBOARDS PLUS MARINE SERVICE, INC.

Principal Place of Business Mailing Address

\$420 NORTHWEST 10TH TERRACE 5420 NORTHWEST 10TH TERRACE

FILED Feb 26 1998 8:00am Secretary of State



FORT LAUDERDALE FL 33309			FOI	FORT LAUDERDALE FL 33309						DO NO	OT WRITE	E IN THIS S	SPACE		
								-	3. Date Incor 05/14/1	porated or C					
2. Principal Place of Business				2a. Mailing Address					4. FEI Number					App	lied For
21				26					65-067	76248				Not	Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					Certificate	of Status De	esired				dditional
22			27						o. Continuato	Or Dialog Di	331100		Fe	e Rec	ulred
City & State				City & State				•	6. Election Ca		-	_			Лау Ве
23			28							Contribution				ded to	
Zip	Country			├─¬ '			,	1	8. This corporation owes or has paid the curre						- 1
24	25 Q Name at	od Address of Curre	29	red Agent	30				Personal Property Tax due June 30.						No
AM			ont riogisto	Tou Agoin		81	Name		U, 1121110 4110	7440,000 0		giotorou i	-goin		
AMERILAWYER CHARTERED 343 ALMERIA AVENUE												 			
CORAL GABLES FL 33134				;			Street Address (P.O. Box Number is Not Acceptable)								
00	MAL GADLES	FE 00104				B3									
•						84	City					FI	85	Zip C	ode
office or r agent. I a	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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.														
SIGNATURE	Signature, lyped or i	printed name of registered a	gent and lifle if a	ni signature r	required wh	nen reinstating)			DATE						
12.		OFFICERS A	ND DIRECT	ORS	13.				ADDITIONS	CHANGES	TO OFFI	CERS AND	DIREC	TORS	IN 12
TITLE	PSTD			DELETE	1.1 70	TLE							☐ Cha	nge	☐ Addition
NAME		, JEFFREY B			1.2 NA	ME									
STREET ADDRESS	5420 NOR		ACE 1.3 S			ADDRESS									
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Inereby certify that the information supplied with this filling 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 of 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 1 my changed for on an attachment with an address.