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

P96000043554 (0) DOCUMENT #

HORIZON YACHT MANAGEMENT, INC.

Principal Place of Business	Mailing Address	
1125 - 48TH STREET BAY #44 39407	1125 - 48TH STREET BAY D MANGONIA FL 33407	
2. Principal Place of Business	2a, Mailing Address	

FILED May 18 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		r admistrat and renies dien admit admit Mater Admit	BIODO IIIDI DIIDI BIIIC BIDI IDDI
1125 - 48TH STREET	1125 48TH STREET			
MANGONIA FL 33407	MANGONIA FL 33407		DO NOT WRITE IN TH	IC COACE
MARGONIA PE 35407	MANGUNIA PL 33407		3. Date Incorporated or Qualified	15 STACE
			05/14/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		NOT APPLICABLE	Not Applicable
Suite Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 # 3	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24 . 25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of (Current Hegistered Agent	B1 Name	10. Name and Address of New Registers	od Agent
BYRNE, JAMES A		81 Name		
540 - 4TH STREET NORTH		62 Street Add	fress (P.O. Box Number is Not Acceptable)	
ST. PETERSBURG FL 33701		83		
·		[83]		
		84 City		85 Zip Code
11 Pursuant to the provisions of Soctions of	07 0502 and 607 11:00 Clarida Statut	yo the should comed one	poration submits this statement for the purpose	
T DINGE OF REGISTERED MORNE OF DOIN IN THE	r State of Florida. Such chappe was a	Hillionizod by the comore	poration submits this statement for the purpose tlion's board of directors. I hereby accept the a	of changing its registered pointment as registered
agent i am iamiliar with, and accept the	obligations of, Section 607.0505, Flo	rida Statutes.		
SIGNATURE Signature, typed or printed injune of reques	eneral across and title Caronicable (NCIE	Registered Agent signature requi	red when ronstating) DATE	·-
	RS AND DIRI CTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	· · · · · · · · · · · · · · · · · · ·
TITLE D	DELETE	1.1 1171.[Change Addition
NAME CRUPI, JOHN M		1.2 NAME		
STREET ADDRESS 1125 - 48TH STREET, B	BAY ##	1.3 STREET ADDRESS	Bay # 3	ļ
CITY-ST-ZIP MANGONIA FL 33407		1.4 CITY - S1 - ZIP		
TITLE	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CHY- ST- ZIP		
TELE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS	•	
CITY-ST-ZIP		3.4. CITY - S1 - ZIP		
TITLE	L_J DELETE	4 1 TIFLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
C/TY-ST-ZIP		4.4 CITY - ST- ZIP		
Title	☐ DELETE	5.1 TILLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	T pries-	5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6111111		Change Addition
NAME		62 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CHY-S1-ZIP		

14. Thereby certify that the information supplied with this filing rices 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 supplied with this filing rices and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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 changes, or disputation with an address.