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

PROFIT CORPORATION ANNUAL REPORT

1998

14. Thereby certify that the information supplied with his film indicated on this annual report or supplemental admiral officer or director of the corporation or the receiver or the Block 12 or Block 13 if changed, or on an attactyring with

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 11 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000051667 (9)

OLD	CONCH HARBOUR, INC.							
Principal Place of Business Mailing Address							IÐI ÐIJÐI ILÐIÐ BIJJÐ	Biril (BBI (BBI
90311 OVERSEAS HWY STE. 8 90311 OVERSEAS HWY TAVERNIER FL 33070 TAVERNIER FL 33070				STE. B		DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						06/14/1996		
_	Place of Business	2a. Mailin	g Address			4. FEI Number	Ar	oplied For
21 26						65-0758187		ot Applicable
<del></del>			Apt #, etc.			5. Certificate of Status Desired	\$8.75	
22 City & Sta	No.	27 City 8	City & State				Fee Re	<del></del>
23	410	28				Election Campaign Financing     Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip		Country	······································	This corporation owes or has paid the		
24	25	29	3		•	Personal Property Tax due June 30.		Ü No
<del></del>	9. Name and Address of Curren			<u>-,                                     </u>		10. Name and Address of New Registere		
	JABRO, JOHN A			81	Name			
90311 OVERSEAS HWY., STE. B TAVERNIER FL 33070				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	INTERNET LE 00070			83			<del></del>	
				84	City		85 Zip (	Code
11. Pursuant office or agent. I	t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	2 and 607.150 of Florida. Suc ations of, Section	8, Florida Statutes th change was aut on 607.0505, Flori	the above thorized by da Statute:	I e-named corporations the corporations.	oration submits this statement for the purpose ion's board of directors. I hereby accept the s	e of changing it	s registered registered
SIGNATURE								
	Signature, typed or printed name of registered age OFFICERS AN		hla (NOIE: F		ent signature require	od when reinstating) DATE		
12.	P	DINECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
NAME	PORTELA, JOSE D			1.2 NAME			ontaings	2 7.00 7.00
ARRIVA DIFFERENCE AND COMPANY			1.3 STREET	ADDRESS			ļ	
CITY-ST-ZIP TAVERNIER FL 33070				1.4 CITY-S				
TITLE			2.1 TITLE	71 2"		Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY-ST-ZIP				2 4 CiTY-	ST-ZIP			
TITLE			DELETE	31 TITLE			☐ Change	Addition
NAME				32 NAME				ļ
STREET ADDRESS	1			3 3 STREET	ADDRESS			1
CITY-ST-ZIP				3 4. CITY - S	ST-ZIP			
TITLE			☐ DELETE	4.1 THILE			Change	Addition
NAME	ł			4.2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY - S	ST - ZIP			
TITLE			DELETE	5.1 TITLE			Change	L Addition
NAME				5.2 NAME				
STREET ADDRESS				53 STREET	1			
CITY-ST-ZIP			C Cruses	5.4 CITY - S	T-ZIP			
TITLE			DELETE	6.1 TITLE			L_ Change	☐ Addition
NAME			$\wedge$	6.2 NAME				
STREET ADDRESS		/		6.3 STREET	ADDRESS			

admity for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as it made under oath; that I am an ered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in