**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000061643

1, Corporation Name

HOLE IN THE WATER OF SOUTH FLORIDA, INC.

Principal	Place	of	Business						

Mailing Address

2555 N.E. 11TH STREET FORT LAUDERDALE FL 33304 2555 N.E. 11TH STREET FORT LAUDERDALE FL 33304

## **FILED** May 06, 1999 8:00 am Secretary of State

05-06-1999 90178 021 \*\*\*150.00



					DO NOT MIGHT IN	, I ( NO OI ACL		
,					3, Date Incorporated or Qualifed 07/23/1996			
2 Oringinal E	Place of Business	2a, Mailing Address			4. FEI Number		Applied For	
	-lace of busiless	26			65-0773640		Not Applicable	
Suite, Apt	# etc	Suite, Apt. #, etc.				\$8.	75 Additional	
22	. <i>m</i> , 616.	27			5. Certifcate of Status Desired		e Required	
City & Sta	nte	City & State			6. Election Campaign Financing	\$5	.00 May Be	
23		28			Trust Fund Contribution		ded to Fees	
Zip	Country	Zip	Country	/	8. This corporation owes the current ye	ear Intangible	_	
24	25	29 3	10		Personal Property Tax.	Yes	No	
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Regis	tered Agent		
	TION 504400		81	Name				
MCVEIGH, EDWARD			82	Street Add	ress (P.O. Box Number is Not Acceptable)			
2555 N.E. 11TH STREET								
FOF	RT LAUDERDALE FL 33304		83					
, I			84	City		85	Zip Code	
		//	7	}		FLITT	· '	
11. Pursuant	t to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	the abov	e-named corp	poration submits this statement for the purpon's board of directors. I hereby accept the	ose of changin	ig its registered	
office or agent. I	registered agent, or both, in the State am families with, and accept the obliga-	of Florida Section change was aut Mons of Section 607,0505, Florid	nonzed by la Statutes	r ine corporati 3.	on's board of directors. Thereby accept the	appointment	13 registered	
		1/11/16/			9-7	8-5		
SIGNATURE	Signature, typed or printed name of registered age		tegistered Age	nt signature require	ed when temstating)			
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	D	☐ DELETE	1.1 TITLE			☐ Cha	inge	
NAME	MATHIS, DON		1.2 NAME					
STREET ADDRESS		<b>.</b>	1.3 STREE	TADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL 33304		1.4 CITY- 8	ST-ZIP			ange Addition	
TITLE	DT	☐ DELETE	2.1 TITLE			Cha	inge Li Addition	
NAME	MCVEIGH, EDWARD		2.2 NAME					
STREET ADDRESS			2.3 STREE	T ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL		2, 4 CITY-	ST-ZIP		Cha	ange Addition	
TITLE	DP	☐ DELETE	3,1 TTTLE			Cha	ilige	
NAME	OSTERTAG, VESNA		3,2 NAME					
STREET ADDRESS		501		T ADDRESS			}	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-	ST-ZIP		☐ Cha	ange	
TITLE	D	<b>₽</b> DELETÉ	4,1 TITLE			L) Clie	rigo 🔲 Addition	
NAME	WESSEL, MARK		4, 2 NAME					
STREET ADDRESS			1	TADDRESS			İ	
CITY-ST-ZIP	PITTSBURG PA 15212	[The ere	4,4 CITY-3	ST-ZIP		Cha	ange Addition	
TITLE		☐ DELETE	51 TITLE			□.000	ingo 🗀 riocidon	
NAME			5.2 NAME	T 4000E66				
STREET ADDRESS	s			ET ADDRESS				
CITY-ST-ZIP	<u> </u>	C Sei Ette	5.4 CITY- 5 6.1 TITLE	51-ZIP		☐ Cha	ange	
TITLE		OELETE					mgv	
NAME			6.2 NAME					
STREET ADDRESS	s			ET ADDRESS			ſ	
CITY-ST-ZIP	\		6.4 CITY-5	ST-ZIP				

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 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 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: