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 # P96000066971 (8)

FILED Feb 20 1998 8:00am Secretary of State

1	ISLAND PAR 3, INC.	,			8) NA 81118 (8) II 1488 (118) 1881
Principal Plac	ce of Business	Mailing Address		I CODILLON AIR IDILIO ZINIA BONIN ODAN CONIN EDINI	OTATO BATTO HETAL INDOPT HAD 1880.
480 8TH STREET PO BOX 35 KEY COLONY BEACH FL 33051 KEY COLONY BEACH F		33051	DO NOT WRITE IN TH	IS SPACE	
				3. Date Incorporated or Qualified	IO OF AGE
				08/08/1996	
—	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0687644	Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zin	Country	28	0	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25 25 Name and Address of Curr	ent Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
ep.		ont riogistered Agent	81 Name	10. Haille and Address of New Registers	o Agent
SPANO, WAYNE J 2701 DOLPHIN DR.					
MARATHON FL 33050			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
""	WATHOR I E SOCO		83		
]					
			84 City	E	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607,1508. Florida Statute	s, the above-named corr	poration submits this statement for the purpose	of changing its registered
office or a	registered agent, or both, in the Sta	te of Florida, Such change was a	uthorized by the corporat	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	ppointment as registered
	art termial that, and accoping the obs	gations of, occition for .coc, f to	noa statutes.		
SIGNATURE	Signature typed or printed name of registered a	igent and title if applicable (NOTE	: Registered Agent signature requir-	ed when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	CPT	☐ DELETE	1.1 TITLE		Change Addition
NAME	SPANO, WAYNE J		1.2 NAME		
STREET ADDRESS	2701 DOLPHIN DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MARATHON FL 33050		1.4 CITY-ST-ZIP		
TITLE	VPS	☐ DELETE	2.1 THTLE		☐ Change ☐ Addition
NAME	SPANO, MARY J		2.2 NAME		
STREET ADDRESS	2701 DOLPHIN DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MARATHON FL 33050	Delete	2 4 City-St-ZiP	3	
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME OTDEET ADDRESS			3.2 NAME		į
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETÉ	3.4. CITY - ST - ZIP		Change Addition
NAME		בן אנננונ	4.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	4.4 City-St-ZiP 5.1 Title		Change Addition
NAME			5.2 NAME		T Awards The Moduling I
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	,	
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
4.0	and the state of t	The state of the s	-		

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 employered 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 artiress.

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