

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

PROFIT
CORPORATION
ANNUAL REPORT
2000FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONSFILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90417 022 ***150.00

DOCUMENT # P96000072973
1. Corporation Name
LUXURY YACHT SALES CORPORATION

850350

Principal Place of Business: 4300 N UNIVERSITY DRIVE
SUITE D202
FT LAUDERDALE, FLORIDA 33351
Mailing Address SAME

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4300 N UNIVERSITY DRIVE
SUITE D202
FT LAUDERDALE, FL
33351 USA
2a. Mailing Address
SAME
27. City & State
SAME
28. City & State
SAME
29. Zip
SAME
30. Country
USA3. Date Incorporated or Qualified
DE AUG 28, 1996
4. FEI Number
650701867
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
7. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No
10. Name and Address of New Registered Agent9. Name and Address of Current Registered Agent
RICHARD ENTIN, ESQ
4300 N. UNIVERSITY DRIVE SUITE D202
FT LAUDERDALE, FLORIDA 3335181. Name
RICHARD ENTIN, ESQ
82. Street Address (P.O. Box Number is Not Acceptable)
4300 N. UNIVERSITY DRIVE
83. SUITE D202
84. City
FT LAUDERDALE
85. Zip Code
33351

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 *Saul W. Harar* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAUL W. HARAR	1.2 NAME	
STREET ADDRESS	4300 N. UNIVERSITY DRIVE #D202	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FLORIDA 33351	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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; and that I am authorized 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 in Block 14 if unchanged, with all other like empowered.

SIGNATURE: *Saul W. Harar* PAUL W. HARAR APRIL 28, 2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 954-817-8553