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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000080038

1. Corporation Name

SOUTHE	PORT VENTURES, INC.				
Principal Place 633 FIFTH KEY FT. LAUDERDAI	DRIVE	Mailing Address 396 S. WITCHDUCK RD S VIRGINIA BEACH VA 2346			
				DO NOT WRITE IN THE	HIS SPACE
				 Date Incorporated or Qualified 09/23/1996 	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26		54-1821191	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te ·	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 the current year	Intangible ☐ Yes ☐ No
24	9. Name and Address of Cu	rept Registered Agent	30	Personal Property Tax. 10. Name and Address of New Register	
	5. Hallie and Address of Cu	Helit Registerou Agent	81 Name	10; Italio alia pasisso di Itali Itagi	
MUR	RDOCH, ROBERT E				
790 EAST BROWARD BLVD, SUITE 400			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33301			83		
			94 00		85 Zip Code
			84 City	F	L 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607, registered agent, or both, in the St im familiar with, and accept the ob-	0502 and 607.1508, Florida Statu ate of Florida. Such change was a digations of, Section 607.0505, Flo	tes, the above-named corp authorized by the corporationida Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable. (NOTE:			E: Registered Agent signature require		
			13.		
12.		AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS	
TITLE	DP	AND DIRECTORS	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE NAME	DP BOYD, JOSEPH W JR	☐ DELETE	1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME STREET ADDRESS	DP BOYD, JOSEPH W JR 396 S. WITCHDUCK RD., SI	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BOYD, JOSEPH W JR 396 S. WITCHDUCK RD., SI VIRGINAI BEACH VA 23462	□ DELETE UITE 200	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	
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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 suppliemental 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 receipt or or trusted 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: BY:

STREET ADDRESS

CITY-ST-ZIP

Minschke II Frank B.

March 19, 1999

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90054 026 ***150.00