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 # P97000024047 (7)

DOLPHIN KING CHARTERS, INC.

FILED Apr 09 1998 8:00am Secretary of State

305-937-2000

| Principal Place of Business Mailing Address | | -{ |
|--|--|--|
| 20801 BISCAYNE BLVD 20801 BISCAYNE BLVD | | |
| SUITE 424 SUITE 424 | | DO NOT WRITE IN THIS SPACE |
| AVENTURA FL 33180 AVENTURA FL 33180 | | 3. Date Incorporated or Qualified |
| | | 03/11/1997 |
| 2. Principal Place of Business 2a. Mailing Address | | 4. FEI Number Applied For |
| 21 26 | | 65-0733023 Not Applicable |
| Suite Apt. 4 etc. Suite Apt. 4 etc. Suite Apt. 4 etc. | 400-9 | 5. Certificate of Status Desired \$8.75 Additional |
| 22 5317E 400-4 27 5317E City & State City & State | 100 | Fee Required 6. Election Campaign Financing \$5.00 May Re |
| 28 | | 6. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution Added to Fees |
| Zip Country Zip | Country | 8. This corporation owes or has paid the current year Intangible |
| | 30 | Personal Property Tax due June 30. Yes No |
| 9. Name and Address of Current Registered Agent | 81 Name | 10. Name and Address of New Registered Agent |
| WALTZER, CRAIG A | 61 Name | |
| 20801 BISCAYNE BLVD S UITE 424 ちょみを 400~9 | 52 Street Addre | ess (P.O. Box Number is Not Acceptable) |
| AVENTURA FL 33180 | 83 < ., | |
| ALMIDIA I E SO 100 | 2013 | te 400-9 |
| | 64 City | FL 85 Zip Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes | s, the above-named corpo | oration submits this statement for the purpose of changing its registered |
| office or registered agent, or both, in the State of Florida Such change was a agent. I am familiar with, and accept the obligations of, Section 607.0505, Flor | utnorized by the corporation ida Statutes. | on's board or directors. I hereby accept the appointment as registered |
| SIGNATURE | | |
| Signature, typod or printed name of registered aprill and title if applicable (NOTE 12. OFFICERS AND DIRECTORS | Registered Agent signature required 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE P DELETE | 1.1 TITLE | Change Addition |
| NAME WALTZER, CRAIG A | 1.2 NAME | |
| STREET ADDRESS 20801 BISCAYNE BLVD | 1.3 STREET ADDRESS 2. C | 1801 Biscayne Blud. Suite 4009 |
| CITY-ST-ZIP AVENTURA FL 33180 | 1.4 CITY-ST-ZIP | · . |
| TITLE DELETE | 2.1 TITLE S | / 	☐ Change 💢 Addition |
| NAME | 2.2 NAME | elizza Danite |
| STREET ADDRESS | | DAS NE 198 TENTACE |
| CITY-ST-ZIP | | 14mi, FL 33179 |
| TITLE DELETE | 3.1 TITLE | Change Addition |
| STREET ADDRESS | 3.2 NAME | |
| CITY-ST-2IP | 3.3 STREET ADDRESS | |
| TITLE DELETE | 3.4. CITY+ST-ZIP 4.1 TITLE | Change Addition |
| NAME | 4.2 NAME | outige |
| STREET ADDRESS | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | 4.4 CITY - ST - ZIP | |
| TITLE DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | 5.2 NAME | |
| STREET ADDRESS | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | 5.4 CHTY-ST-ZIP | |
| TITLE DELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | 6.2 NAME | |
| | | |
| STREET ADDRESS | 6.3 STREET ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | |