## 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 # P97000030486 (9)

CENTRAL NAUTICAL INTERNATIONAL, INC.

## **FILED** Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
716 LAGOON N PALM BEA		716 LAGOON DRIVE N PALM BEACH FL 33408				DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified
								04/03/1997
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21			26					65-0742795 Not Applicable
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5. Certificate of Status Desired
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
Zip Country			28	Zip Country			,	Trust Fund Contribution
24	25		29	n 🗀		, , , , , , , , , , , , , , , , , , ,	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 🔀 No
<u> </u>		and Address o	and the same of the control of the c	stered Agent	[50]			10. Name and Address of New Registered Agent
—— <del>[]</del>	INGS, INC.					81	ىر Name	EGGERT KRONBY
		TH STREET					Street Ad	Address (P.O. Box Number is Not Acceptable)
- FT LAUDERDALE FL-33311						82		address (P.O. Box Number is Not Acceptable)
						63	]	
						84	City	PL 85 Zip Code 33408
11. Pursuant	to the provis	ions of Sections	607.0502 and 6	607.1508, Flori	da Statutes, the	abov	e-named co	corporation submits this statement for the purpose of changing its registered oralism shoard of directors. I hereby accept the appointment as registered
agent. I a	egistered ag im familiar wi	th, and accept t	he obligations o	of, Section 607	.0505, Florida S	Statute	y (10 C1040)	
SIGNATURE Signature, typed or protect came of registered agost and tills of applicable (NOTE Registered Agent signature required when reinstating)  DATE								
Signature, typed or protect name of registered agried and tilk if appticable. (NOTE Rogistr  12. OF FICE RS AND DIRECTORS 13						-	ani signature red	required when reinstaling) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	01110	1 130 73 31 10 10 11			1 TITLE		Change Addition
NAME	KRONB	Y, EGGERT		_		2 NAME		_
STREET ADDRESS	#44 LACOON DOUG			1.3 STREET AS			ADDRESS	
CITY-ST-ZIP	N PALM	BEACH FL 33	3408		1.	4 CITY-S	ST - ZIP	
TITLE				DI	ELETE 2	1 THTLE		Change Addition
NAME					2	2 NAME		
STREET ADDRESS					2	3 STREET	ADDRESS	
CITY-ST-ZIP						4 CITY-	ST-ZIP	
TITLE				L Di	4	1 TITLE		Change Addition
NAME					_	2 NAME		
STREET ADDRESS					1		ADDRESS	
CITY-ST-ZIP TITLE	<del></del> _	· · · · · · · · · · · · · · · · · · ·	<u></u>	D		4. CITY-1 1 THLE	SI · ZIP	Change Addition
NAME				<u>, , , , , , , , , , , , , , , , , , , </u>		2 NAME		
STREET ADDRESS	1						ADDRESS	
CITY-ST-ZIP						4 City-S		
TITLE				□ Di		1 TITLE	-	Change Addition
NAME					5	2 NAME		
STREET ADDRESS					5	3 STREET	ADDRESS	
CITY-ST-ZIP						4 CITY - S	ST - ZIP	
TITLE				□ Di		1 TITLE		Change Addition
NAME						2 NAME		
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP	carbity that th	a information as	notice with this	filing does not		4 CITY-S		d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
ra, indicut C	on Min aver	o miormation Su;	aparou with tello	aming GOGO HOL	quality for the	over the	at man alateu	the state and the state of the

indicated on this annual report or supplemental annual report officer or director of the corporation or the receiver or frustee Block 12 or Block 13 if changed, or on an affachment with s true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in