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FILED
Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000038816 (9)**

1. Corporation Name

USA BOATING CENTER, INC.



Principal Place of Business

**4491 ANGLERS AVE.
DANIA FL 33312**

Mailing Address

**4491 ANGLERS AVE.
DANIA FL 33312**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1997

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**FITZPATRICK, MICHAEL
4491 ANGLERS AVE.
DANIA FL 33312**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

[Signature]

Michael J. Fitzpatrick

1/5/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	EISELE, GEOFFREY R	
STREET ADDRESS	5419 N.E. 22ND TERRACE	
CITY - ST - ZIP	FT LAUDERDALE FL 33308	

TITLE	SVID	<input type="checkbox"/> DELETE
NAME	FITZPATRICK, MICHAEL J	
STREET ADDRESS	5419 N.E. 22ND TERRACE	
CITY - ST - ZIP	FT LAUDERDALE FL 33308	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S.V.D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Eisele, Geoffrey R	
1.3 STREET ADDRESS	2048 SE 17th ST	
1.4 CITY - ST - ZIP	Pompano Bch, FL 33062	

2.1 TITLE	P.T.D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Fitzpatrick, Michael J.	
2.3 STREET ADDRESS	5419 NE 22nd Terrace	
2.4 CITY - ST - ZIP	Ft. Lauderdale, FL 33308	

3.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Liliana Gomez	
3.3 STREET ADDRESS	9066 W. Atlantic Blvd #417	
3.4 CITY - ST - ZIP	Coral Springs, FL 33071	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 or the receiver or trustee 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.

SIGNATURE:

[Signature]

Michael J. Fitzpatrick

1/5/98

(954)

894-9895

CR2E034 (10/97)