TILE NU.1. FILING FEE AFIEM. AT TOLIO 3000.1 J

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Jun 03 1998 8:00am

Secretary of State

☐ Change

200002549332

-06/05/98--01085---040

***150.00

Addition

Secretary of State DIVISION OF CORPORATIONS

ANNUAL REPORT
1998

STREET ACCRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-Z#

TITLE

HALE

300% 1.00°

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DOCUMENT # 7000044788

Argosy Charters, Inc.				
Principal Place of Business				
P.O. Box 171 W. Palm Beach, FL 33402 P.O. Box 171 W. Palm Beach, FL		33402	DO NOT WRITE IN THIS SPACE	
			3. Date incorporated or Qualified 05/20/97	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 P.O. Box 171	26 P.O. Box 171		65-0773451	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State W. Palm Beach, FL 13.402	City & State 28 W Palm Beach, FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 25	Zip Country 33402 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
g. Name and Address of Current Registered Agent			10. Name and Address of New Registers	d Agent
Paxman, John T., Esq. 1601 Forum Place, Suite 80 W. Palm Beach, FL 33401	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83			
		84 City	F	
Pursuant to the provisions of Sections 607.0602 office or registered about, or both, in the State agent. I am familiar with, and accept the original sections.	and 557, 1508, Florida Statutes, the applications of Section 607,0505, Florida Statutes of Section 607,0505, Florida Statutes	above-named cor ed by the corpora stutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the appropriate to the statement of the statement of the statement for the purpose the statement for	of changing its registered ppointment as registered
SIGNATURE			04/30/98	

name of resistered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DPST DELETE K-X Change TITLE 1.1 TITLE Addition NAME Lurla, Andrew H. 1.2 NAME STREET ADDRESS - AP 37: 1.3 STREET ADDRESS P.O. Box 174 CITY-ST-ZIP 1.4 CITY-ST-ZIP W. Palm Beach. FL 33402 TITLE OELETÉ 21 TITLE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ___ Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZP 3.4. CITY-ST-ZIP TITLE ☐ DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZE 4.4 CITY-ST-ZIP DELETE IIILE ☐ Addition 5.1 TITLE NAME 5.2 NAME 2894006 500

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 supplier intal 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 employered 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 or an attantiment with an address. 190 561-374-0880

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

&1 TITLE

82 NAME

DELETE