

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

FILED

Sep 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 # **P97000053665 (0)**

1. Corporation Name:

ATLANTIC BOAT WORKS, INC.



Principal Place of Business 817 S.E. 17TH ST. DEERFIELD BEACH FL 33441	Mailing Address 817 S.E. 17TH ST. DEERFIELD BEACH FL 33441
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/18/1997	
25		30		4. FEI Number 65-0766556 Applied For Not Applicable	
25		30		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

**FITZ, JAMES
817 S.E. 17TH ST.
DEERFIELD BEACH FL 33441**

10. Name and Address of New Registered Agent

81 Name KATERINA THOMPSON-WEINER
82 Street Address (P.O. Box Number is Not Acceptable) 817 S.E. 17TH STREET
83
84 City DEERFIELD BEACH, FL
85 Zip Code 33441

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 *Katerina Thompson-Weiner* **KATERINA THOMPSON-WEINER** **PRESIDENT** **9/15/98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PRESIDENT	☐ DELETE	1.1 TITLE P/T/D	☒ Change ☐ Addition
NAME JAMES FITZ		1.2 NAME KATERINA THOMPSON-WEINER	
STREET ADDRESS 817 S.E. 17TH STREET		1.3 STREET ADDRESS 817 S.E. 17TH STREET	
CITY-ST-ZIP DEERFIELD BEACH, FL 33441		1.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33441	
TITLE VTD	☐ DELETE	2.1 TITLE V/S/D	☒ Change ☐ Addition
NAME KATERINA THOMPSON-WEINER		2.2 NAME JAMES FITZ	
STREET ADDRESS 817 S.E. 17TH STREET		2.3 STREET ADDRESS 817 S.E. 17TH STREET	
CITY-ST-ZIP DEERFIELD BEACH, FL 33441		2.4 CITY-ST-ZIP DEERFIELD BEACH, FL 33441	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
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 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 *Katerina Thompson-Weiner* **KATERINA THOMPSON-WEINER, PRESIDENT** **9/15/98** **(954) 725-9340**

CR2E034 (10/97)