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

Mailing Address

UNIT 508

26

28

29

1760 GULF BLVD.

2a. Mailing Address

City & State

Zip

ENGLEWOOD FL 34223

Suite, Apt. #, etc.

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

ENGLEWOOD FL 34223

Suite, Apt #, etc.

City & State

23

Zip

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

2. Principal Place of Business

UNIT 508

1780 GULF BLVD.

UNIT 508



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700056436 (3)

Country

9. Name and Address of Current Registered Agent

25

BENNETT, GEORGE M 1760 GULF BLVD.

ENGLEWOOD FL 34223

SALTY DOG CHARTERS, INC.

FILED May 07 1998 8:00am Secretary of State

	(168/106) (18 FB1) 180/1 (B1) (B1)		Oldro Dillo Oldob Haro Bark (60)
	DO NOT WRITE	E IN TH	IS SPACE
3.	Date Incorporated or Qualified		
	06/26/1997		
4.	FEI Number		Applied For
4	5-0776939		Not Applicable
5.	Certificate of Status Desired		\$8.75 Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
8.	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
10.	Name and Address of New Registered Agent		

Zip Code

Change

Change

Addition

Addition

Addition

SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE president BRNARTT BLUD, UNIT 508 NAME 12 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 City-St-ZiP Change TITLE 2.1 TITLE Addition NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-S1-ZIP

3.4. CITY-ST-ZIP

41 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

DELETE

DELETE

☐ DELETE

Country

81 Name

63

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.

30

64 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 suppliemental 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 frustee 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.

COURCE M RENNETT 4/1 /28 640/529-007

***150.00

200002518042

-05/11/98--01019--nds change

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