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 # P97000073130 (1)

REEL DEAL YACHTS, INC.

FILED May 05 1998 8:00am Secretary of State

Principal Place of Business Mailing Address	BH MEI
	3 (1 100)
1855 NE 123 ST 1855 NE 123 ST	
N MIAMI FL 33181 N MIAMI FL 33181 DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified	
08/15/1997	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Appl 21 25 2550 S. BAYSHORE AC. 65-6104324 Not A	jed For
Sulte, Apt. #, etc. Suite, Apt. #, etc. Suite Apt. # etc.	Applicable ditional
27 SUITE 10 5. Certificate of Status Desired Fee Requ	
City & State City & State 6. Election Campaign Financing \$5.00 M	- *
28 Tiost and Community Lin Added to	
2ip Country 2ip Country 8. This corporation owes or has paid the current year Intan 25 29 33/33 0.5.4. Personal Property Tax due June 30. Yes 1	•
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
SOUTH FLORIDA RESIDENT AGENTS, INC. 81 Name	
4750 1ST UNION FINANCIAL CENTER 82 Street Address (P.O. Box Number is Not Acceptable)	
200 \$ BISCAYNE BLVD.	
MIAMI PL 33131	
FL 85 Zip Co	de
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its roffice 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 re	egistered
agent. Lam familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.	gistered
SIGNATURE	
Signature, typicd or protect name of registered agent and bits it applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OF HICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
	Addition
NAME MOEJAIN, MARCOS 1.2 NAME	
STREET ADDRESS 1855 NE 123 ST 1.3 STHEFT ADDRESS	
CITY-ST-ZIP N MIAMI FL 33181 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE	Addition
NAME 2.2 NAME	Noomon
STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP 2. 4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE Change	Addition
NAME 32 NAME	
STREET ADDRESS 3.9 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP	
	Addition
NAME 4. 2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 44 CITY-ST-ZIP	T sassing.
TITLE DELETE 5.1 TITLE Change	Addition
NAME	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
	Addition
TITLE DELETE 6.1 TITLE Change	
TITLE DELETE 6.1 TITLE Change I NAME 6.2 NAME	

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 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.

4/24/98

SIGNATURE: MARCOC MOOTA W