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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700080901

1. Corporation Name

BAHAMAS BILLFISH CHAMPIONSHIP, INC.

Principal Place of Business	Mailing Address
499 EAST SHERIDAN STREET #317	499 EAST SHERIDAN STREET #3

Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90063 017 ***150.00

1 (64) (64)	 		101 18 11 1 1 8 111	

Principal Place	of Business	Mailing Address					.,	
499 EAST SHEF	RIDAN STREET #317	499 EAST SHERIDAN STR	EET #317					
DANIA FL 3300	1	DANIA FL 33004				DO NOT WEST IN THE	DACE	
						DO NOT WRITE IN THIS S 3. Date Incorporated or Qualifed	ACE	_
	·							
						09/16/1997 4. FEI Number		nuliad For
⊢ −	ace of Business	2a. Mailing Address				1 1		pplied For
21		26				65-0782957-		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		Additional lequired
22		27 Cit. 8 Ct.						
City & State	9	City & State				6. Election Campaign Financing		May Be to Fees
23	<u> </u>	28	Cou	mêm (Trust Fund Contribution		to rees
Zip	Country	Zip	Cou	intry	,	8. This corporation owes the current year Inta	ng⊪bie ∐Yes	™ No
24	25	29	30			Personal Property Tax. 10. Name and Address of New Registered A		
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered A	gent	
DENI	RENDT, AL			"	Hame			
	EAST SHERIDAN STREET #317			82	Street Add	lress (P.O. Box Number is Not Acceptable)		
DANI	A FL 33004			83				
				84	City		85 Zip	Code
į					•			
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the a	bove	-named corp	poration submits this statement for the purpose of c ion's board of directors. I hereby accept the appoin	hanging it	s registered
office of n	egistered agent, or both, in the State o m familiar with, and accept the obligat	or Florida. Such change was ions of, Section 607.0505, Fl	autnorizet orida Stat	ı by ı utes.	ne corporati	ion's board of directors. Thereby accept the appoint	IIIICIII AS I	egistered
_						•		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Agent	signature require	ed when reinstating) DATE		
12.	OFFICERS ANI	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	☐ DELETE	1.1 17	ΠE		`	☐ Change	Addition
NAME	BEHRENDT, AL		1.2 N	ME				V
STREET ADDRESS	499 EAST SHERIDAN STREET	¥317	1.3 57	REET:	ADDRESS			(
CITY-ST-ZIP	DANIA FL 33004		1.4 CI	TY-ST	-ZIP			
TITLE	VD	☐ DELETE	2.1 TI				Change	☐ Addition
NAME	FLETCHER, BRENDA		2.2 N	AME				
STREET ADDRESS	499 EAST SHERIDAN STREET	#317			ADDRESS		,	_]
]	DANIA FL 33004	ron		ITY-\$1				\
CITY-ST-ZIP TITLE	STD	☐ DELETÉ	3.1 TI		1-¢1F	- 11-10-12-1	Change	Addition
ľ	DUDAS, JENNIFER		3.2 N	-			_	_
NAME	499 EAST SHERIDAN STREET	4217			ADDRESS			
STREET ADDRESS		F01/						
CITY-ST-ZIP	DANIA FL 33004	☐ DELETE	_	(TY-S)	-ZIP		Change	Addition
TITLE			4.1 TI		j		c.i.i.igo	[] / (65,1104)
NAME *			4. 2 N					ļ
STREET ADDRESS					ADDRESS			Ì
CITY-ST-ZIP	·			1Y-S1	-ZIP			D & delition
TITLE		☐ DEFELE	5.1 TT				Change	☐ Addition
NAME			5.2 N					ĺ
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				TY-ST	-ZIP			
TITLE		☐ DELETE	6.1 TI	TLE	[_		Change	☐ Addition ↓
NAME .			6.2 N	AME	ĺ			Ī
STREET ADDRESS	Later Blood of the state of the		6.3 ST	REET	ADDRESS			ļ
CITY-ST-ZIP:			6.4 CI	TY-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 any address, withyall other like empowered.

SIGNATURE