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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000081537 (7) DOCUMENT

FILED Jan 22 1998 8:00am Secretary of State

ARS WATERCRAFT, INC. Principal Place of Business Mailing Address 109 S. ANCHORAGE DR. 109 S. ANCHORAGE DR. N. PALM BEACH FL 33408 N. PALM BEACH FL 33408 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/19/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number X Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intancible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ARSENAULT, GERARD 109 S. ANCHORAGE DR. 82 Street Address (P.O. Box Number is Not Acceptable) N. PALM BEACH FL 33408 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSI DELETE Change Addition TITLE 1.1 TITLE ARSENAULT, GERARD NAME 1.2 NAME 109 S. ANCHORAGE DR. STREET ADDRESS 1.3 STREET ADDRESS N. PALM BEACH FL 33408 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE ARSENAULT, NANCY 2.2 NAME NAME 109 S. ANCHORAGE DR. STREET ADDRESS 2.3 STREET ADDRESS N. PALM BEACH FL 33408 CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ Change DELETE ☐ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS 3.4. CiTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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.

98 (41)840-1580