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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

P97000088549 (5)

YACHTS PLUS, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address		a taddigas tid testi febri desti ebst dase ibiat idibi dit)	
10740 NW 21 PLACE 10740 NW 21 PLACE				
CORAL SPRINGS FL 33071	CORAL SPRINGS FL 330	071	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
			10/14/1997	
2. Principal Place of Business	2a, Mailing Address			Applied For
21 26			165-0792237	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75	Additional
22 27		Fee f	Required	
City & State			O May Be	
23	28			d to Fees
Zip Country	Zφ	Country	8. This corporation owes or has paid the current year I	
24 25 25 Name and Address of Currer		30	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	∐ No
O'CNNER, ROSEMARY 10740 NW 21 PLACE CORAL SPRINGS FL 33071				
		82 Street Address (P.O. Box Number is Not Acceptable) 83		
		84 City	 85 Zip	o Code
		'	FL T	
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. Hereby accept the appointment as registered				
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE Signature typed or printed name of registered age	erd and title if applicable (NOTE:	Registered Agent signature requi	red when reinstating) DATE	
	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
TITLE D	[_] DELETÉ	1.1 TITLE	L_ Change	: Addition
NAME DINUCCI, SEBASTIAN		1.2 NAME		ŀ
STREET ADDRESS 10740 NW 21 PLACE		1.3 STREET ADDRESS		
CITY-ST-ZIP CORAL SPRINGS FL 33071		1.4 CITY - ST - ZIP		
TITLE	☐ DELETE	2.1 THILE	Change	Addition
NAME DINUCCI, DEBORAH		2.2 NAME		
STREET ADDRESS 10740 NW 21 PLACE		2.3 \$TREET ADDRESS		
CITY-ST-ZIP CORAL SPRINGS FL 33071		2 4 CITY-ST-ZIP		
TITLE D	DELETE	3 1 TITLE	☐ Change	Addition
NAME O'CONNER, ROSEMARY		3.2 NAME		ļ
STREET ADDRESS 10740 NW 21 PLACE		3.3 STREET ADDRESS		Ţ
CITY-ST-ZIP CORAL SPRINGS FL 33071	DELETE	3.4. CITY-ST-ZIP	Change	Addition
TITLE	ש טנגנונ	4.1 TITLE	Change	Manifoli
NAME CTREET ADDRESS		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE	DELETE	4.4 City-St-ZiP 5.1 Title	Change	Addition
	C) petrit		Crange	L. Audition
NAME STREET ADDRESS		5.2 NAME]
)		5.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE	DELETE	54 CITY-ST-ZIP 61 TITLE	Change	Addition
NAME	□ pricit	1 1	Claude	L Addition
		6.2 NAME		Į
STREET ADDRESS		6.3 STREET ADDRESS		ĺ
CITY-ST-ZIP	CAL ALCO A CONTROL OF A CONTROL	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further certify that the	

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.