

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

FILED
Jul 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 2970000889165

1. Corporation Name
Floater's Delight

Principal Place of Business
2032 N.E. 155th St.
North Miami Bch, FL 33162

2. Principal Place of Business
21 2032 NE 155th St.
Suite Apt #, etc.
22 City & State
N. Miami Bch, FL
23 Zip 33162 Country USA.
24 33162 25 USA.

2a. Mailing Address
26 2032 NE 155th St.
Suite Apt #, etc.
27 City & State
N. Miami Bch, FL
28 Zip 33162 Country USA.
29 33162 30 USA.

3. Date Incorporated or Qualified
Oct 15 97

4. FEI Number
Applied For ☒ 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name
Eitan Dagan, Esq
82 Street Address (P.O. Box Number is Not Acceptable)
430 Washington Ave
83 Suite 205A
84 City
Miami Beach FL 85 Zip Code
33139

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 family with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Eitan Dagan DATE 4-30-98

12. OFFICERS AND DIRECTORS

TITLE President
NAME Dean Panton
STREET ADDRESS 2032 N.E. 155th St.
CITY-ST-ZIP N. Miami Bch FL 33162

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 supplementary 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 registered agent or authorized 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.

SIGNATURE Eitan Dagan DATE 4-30-98

DO NOT WRITE IN THIS SPACE

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CR2E034 (10/97)