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FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT # P97000099889 (2)

1. Corporation Name
NEPTUNE PARASAIL, INC.



Principal Place of Business
4134 GULF OF MEXICO DR. STE 302
LONGBOAT KEY FL 34228

Mailing Address
4134 GULF OF MEXICO DR. STE 302
LONGBOAT KEY FL 34228

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 HARVEY AVENUE APPROACH
Suite, Apt. #, etc.

22 DAYTONA PUBLIC BEACH
City & State

23 DAYTONA BEACH, FL.
City & State

24 32118
Zip

25 U.S.A.
Country

2a. Mailing Address
26 PO BOX 7085
Suite, Apt. #, etc.

27 DAYTONA BEACH, FL.
City & State

29 32116
Zip

30 U.S.A.
Country

3. Date Incorporated or Qualified

11/24/1997

4. FEI Number
65-0796383

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

DE PAOLIS, ALESSANDRO
4134 GULF OF MEXICO DR, STE 302
LONGBOAT KEY FL 34228

10. Name and Address of New Registered Agent

81 Name DE PAOLIS, ALESSANDRO

82 Street Address (P.O. Box Number is Not Acceptable)
C/O MCCLAIN & CO. (S. BLOCK)

83 200 SOUTH BISCAYNE BOULEVARD, SUITE 1700

84 City MIAMI

FL

85 Zip Code 33131

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 A.P. De Paolis ALESSANDRO DE PAOLIS - PRESIDENT

04/29/98

12. OFFICERS AND DIRECTORS

TITLE PD
NAME DE PAOLIS, ALESSANDRO
STREET ADDRESS 4134 GULF OF MEXICO DR, STE 302
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE VD
NAME ZEILMANN, KONRAD
STREET ADDRESS 4134 GULF OF MEXICO DR, STE 302
CITY-ST-ZIP LONGBOAT KEY FL 34228

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS PO BOX 7085
1.4 CITY-ST-ZIP DAYTONA BEACH, FL 32116 N/A

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS PO BOX 7085
2.4 CITY-ST-ZIP DAYTONA BEACH, FL 32116 N/A

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 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.

SIGNATURE A.P. De Paolis ALESSANDRO DE PAOLIS

04/29/98 (904) 304-1680

CR2E034 (10/97)