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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800000645

1. Corporation Name

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90060 003 ***150.00

SAVAGE	YACHTS, INC.											
	<u> </u>						·					
Principal Place		Mailing Address										
5500 1ST AVE. NORTH ST. PETERSBURG FL 33710 5500 1ST AVE. NORTH ST. PETERSBURG FL 33710												
51. FETENSBORG FE 33/10 51. FETENSBORG FE 35/10							DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualifed					
		Adultina Address					01/02/1998 4. FEI Number			Annli	ied For	
— ·	lace of Business	2a. Mailing Address					59-3487660		Н		Applicable	
Suite, Apt.	# atc	Suite, Apt. #, etc.							\$8.7		ditional	
22	m, 916.	27					5. Certifcate of Status Desired			Requ		
City & State	8 · · · · · · · ·	City & State	_v.			= .	6. Election Campaign Financing		\$5.	00 м	ay Be	
23		28	9 4-1.	_			Trust Fund Contribution		Add	ed to	Fees	-
Zip	Country	Zip	Cou	intry			8. This corporation owes the curr	rent year Inta		_		
24	25	29	30				Personal Property Tax.		☐ Yes		No	
	9. Name and Address of Current	Registered Agent		04	N		10. Name and Address of New I	Registered A	Agent			
COR	PORATION SERVICE COMPANY			81	Name							
	HAYS STREET			82	Street Ad	ddress	(P.O. Box Number is Not Accept	able)				
TALL	AHASSEE FL 32301-2525			83								
				84	City				85	Zip Co		
				1	City			FL	1			
					L						nistered	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida S	tatutes, the a	bove	e-named co	orpora	tion submits this statement for the	purpose of of the appoir	changing ntment a	g its re s reais	stered	
11. Pursuant office or reagent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida S of Florida. Such change w ions of, Section 607.0505	tatutes, the a ras authorized , Florida Stat	bove by utes	e-named co the corpora	orpora ration's	tion submits this statement for the board of directors. I hereby accept	purpose of pt the appoir	changing ntment a	g its re s regis	stered	
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505	, Florida Stat	utes.					changing ntment a	g its re s regis	stered	
agent. I a	m familiar with, and accept the obligation	and title if applicable.	NOTE: Registered	utes.			en reinstating)	DATE				
agent. I all SIGNATURE	m familiar with, and accept the obligation of registered agent OFFICERS AND	and title if applicable. Directors	NOTE: Registered	I Agen				DATE	D DIRE	CTOR		
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AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AND DP SAVAGE, DUDLEY 5500 1ST AVE. NORTH ST. PETERSBURG FL 33710	and title if applicable. Directors	(NOTE: Registered 13. E 1.1 TI 1.2 N 1.3 S 1.4 C	TLE AME	nt signature req		en reinstating)	DATE	D DIRE	CTOR:	S IN 12	
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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 with all other like empowered.

SIGNATURE:

EQUIRDudley Savage

04/20/99(727) 344-5500