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

PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000040409

APPROVED

99 MAR 26 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

Affiniti Yacht Brokerage, Inc.

Principal Place of Business / Mailing Address

4400 N. Federal Hwy, Suite 210
Boca Raton, FL 33431

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 4400 N. Federal Hwy.
Suite, Apt. #, etc.
22 Suite 210
City & State
23 Boca Raton, FL
Zip / Country
24 33431 25 USA

2a. Mailing Address

26 4400 N. Federal Hwy
Suite, Apt. #, etc.
27 Suite 210
City & State
28 Boca Raton, FL
Zip / Country
29 33431 30 USA

3. Date Incorporated or Qualified: May 01, 1998

4. FEI Number: 65-0835760 — 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 the current year Intangible Personal Property Tax: X Yes [ ] No

9. Name and Address of Current Registered Agent

Craig R. Travis
4400 N. Federal Hwy., Suite 210
Boca Raton, FL 33431

10. Name and Address of New Registered Agent

81 Name: Craig R. Travis
82 Street Address (P.O. Box Number Not Acceptable): 4400 N. Federal Hwy., Suite 210
83
84 City: Boca Raton FL 85 Zip Code: 33431

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: Craig R Travis, President — Craig R. Travis as President — March 23, 1999
Signature, typed or printed name of registered agent and title if applicable — (Must be Registered Agent signature if a new registered agent) — Date

12. OFFICERS AND DIRECTORS

TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President [ ] Change [ ] Add/Delete
12 NAME	Craig R. Travis
13 STREET ADDRESS	4400 N. Federal Hwy, Suite 210
14 CITY-ST-ZIP	Boca Raton, FL 33431
21 TITLE	[ ] Change [ ] Add/Delete
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[ ] Change [ ] Add/Delete
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[ ] Change [ ] Add/Delete
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[ ] Change [ ] Add/Delete
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[ ] Change [ ] Add/Delete
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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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: Craig R Travis, as President Craig R. Travis — March 23, 1999 — (561) 391-1614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #