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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P98000042719

A WHAL	E'S TAIL CHA	RTERS, INC.						. I INGULUM ALG LÄIGI IPHIL BANK SEMI A		14 Mar (1804 A 1844 A 1857	•	
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Principal Plac	e of Business		Ma	iling Address					IBISS BRIST MENTE CITIES II	DAN YAND IBM YA	<b>I</b> I	
908 SOUTH DIXTE HIGHWAY LANTANA FL 33462		908 SOUTH DIXIE HIGHWAY LANTANA FL 33462					. DO NOT WRITE	IN THIS SPACE				
								3. Date Incorporated or Qualified	III THIS SPINSE		$\neg$	
								05/06/1998	f			
2. Principal Place of Business			2a. Mailing Address					4. FEI Number		Applied For	or 3	
21		28					65-0840946		Not Applicab	HO î		
Suite, Apt. #, etc.			Suite, Apt. #, etc. 27					5. Certifcate of Status Desired	Additional Required			
City & State			28	City & State			•	Election Campaign Financing \$5:00 May Be  Trust Fund Contribution Added to Fees				
Zip	c	ountry		Zlo	<del></del>	Country	у	8. This corporation owes the current			┪.	
24	25	•	29		36	_	•	Personal Property Tax.	Yes	□No		
		ddress of Curren		ered Agent		<u> </u>		10. Name and Address of New Reg	istered Agent		$\Box$	
0.40	TEN IEEEDEN					81	Name					
Garten, Jeffrey A 5096 Arbor Glen Circle						82	Street Add	ess (P.O. Box Number is Not Acceptable)				
LAKI	E WORTH FL 33	463				83	3		Han Harrin	78 C. J. 2015		
						<u> </u>	<u> </u>		85 Z	ip Code		
									1031 4	שטטיי טוג		
	ن د					84	1		FLII	•		
11. Pursuant office or ragent. 1 a	to the provisions or registered agent, or arm familiar with, and	Sections 607.050; both, in the State of accept the obligat	2 and 60 of Florida tions of.	7.1508, Florida a. Such change Section 607.050	Statutes, was auth 05, Florida	ſ	1	poration submits this statement for the pur tion's board of directors. I hereby accept th	FLII	•		
11. Pursuant office or ragent. 1 a						, the abov torized by a Statutes	re-named cor the corporates.		pose of changing se appointment as	•		
		f Sections 607.050; both, in the State of accept the obligated accept the obligated agent of registered agent of FFICERS AN	I and title if	applicable.		, the abov torized by a Statutes	re-named cor the corporates.		pose of changing te appointment as	Its registered registered		
SIGNATURE		d name of registered agen	I and title if	applicable.	(NOTE: Re	, the abov corized by a Statutes	re-named cor the corporates.	red when reinstating)	pose of changing te appointment as	Its registered registered		
SIGNATURE	Signature, typed or printe	d name of registered agen OFFICERS AN	I and title if	applicable.	(NOTE: Re	, the above corized by a Statutes optioned Appendix 13.	re-named cor the corporates.	red when reinstating)	pose of changing to appointment as	Its registered registered		
SIGNATURE  12. TITLE	PD GARTEN, JEFF	OFFICERS AN	I and title if	applicable.	(NOTE: Re	the above conized by a Statutes 13.	re-named cor the corporates.	red when reinstating)	pose of changing to appointment as	Its registered registered		
SIGNATURE  12.  TITLE  NAME	PD GARTEN, JEFF	OFFICERS AND OFFICERS AND REY A NEN CIRCLE	I and title if	sppikable. TORS	(NOTE: Re	the above torized by a Statutes 13.  1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S	re-named cory the corporal s.	red when reinstating)	pose of changing to appointment as  DATE  ERS AND DIRECT  Chang	its registered registered	§] ] R2E034 (11/98)	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	PD GARTEN, JEFF 5096 ARBOR C LAKE WORTH VD	OFFICERS AN OFFICERS AN REY A BLEN CIRCLE FL 33483	I and title if	applicable.	(NOTE: Re	the above control to the control to	re-named cory the corporal s.	red when reinstating)	pose of changing to appointment as	its registered registered	§] ] R2E034 (11/98)	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PD GARTEN, JEFF 5096 ARBOR O LAKE WORTH VD GARTEN, KATH	OFFICERS AND OFFICERS AND REY A SLEN CIRCLE FL 33483 (LEEN M	I and title if	sppikable. TORS	(NOTE: Re	the above control by a Statutes a	re-named cory y the corporat y nt signature requi	red when reinstating)	pose of changing to appointment as  DATE  ERS AND DIRECT  Chang	its registered registered	§] ] R2E034 (11/98)	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-8T-ZIP TITLE	PD GARTEN, JEFF 5096 ARBOR (LAKE WORTH VD GARTEN, KATH 5096 ARBOR (C. )	OFFICERS AN OFFICERS AN REY A SLEN CIRCLE FL 33483 ILEEN M SLEN CIRCLE	I and title if	sppikable. TORS	(NOTE: Re	the above control by a Statutes a	re-named cory y the corporat s.  TADDRESS TADDRESS	red when reinstating)	pose of changing to appointment as  DATE  ERS AND DIRECT  Chang	its registered registered	§] ] R2E034 (11/98)	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-81-2IP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PD GARTEN, JEFF 5096 ARBOR O LAKE WORTH VD GARTEN, KATH	OFFICERS AN OFFICERS AN REY A SLEN CIRCLE FL 33483 ILEEN M SLEN CIRCLE	I and title if	applicable.  TORS  DELE	(NOTE: Re	the above horized by a Statutes a Statutes as a Statutes a	re-named cory y the corporat s.  TADDRESS TADDRESS	red when reinstating)	pose of changing the appointment as  CATE  ERS AND DIRECT  Chang	its registered registered	GR2E034*(11/98)	
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME	PD GARTEN, JEFF 5096 ARBOR CLAKE WORTH VD GARTEN, KATH 5096 ARBOR CLAKE WORTH	OFFICERS AN OFFICERS AN REY A SLEN CIRCLE FL 33483 ILEEN M SLEN CIRCLE	I and title if	applicable.  TORS  DELE	(NOTE: Re	the above horized by a Statutes of Statute	re-named con- y the corporation requirements of the corporation of the	ADDITIONS/CHANGES TO OFFICE	pose of changing reappointment as DATE.  ERS AND DIRECT Chang	its registered registered TORS IN 12 P Addit	CR2E034 (11/98)	
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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 ceth; 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 for on an adjachingent with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

1/22/99

561-547-3483

**FILED** 

Feb 16, 1999 8:00 am Secretary of State

02-16-1999 90014 020 \*\*\*150.00