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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION QF CORPORATIONS**

1999 DOCUMENT # 17 98 0000 63 710

1. Corporation Name
PEER GYPT Uacht + Marine Works, Irr.

Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90086 022 ***150.00

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Principal Place	3.E. 174NS+#31C	Mailing Address		······································						
Ft.Lauderdale, FL Same					DO NOT WRITE IN THIS S			SPACE		
*				3. Date Incorporated or Qualified 4 / 17 198						
Principal Place of Business 2a. Mailing Address						4. FEI Number			oplied For	†
21 26						65-0850 <i>5</i> 8			ot Applicable]
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired		\$8.75 A	Additional	
22						6. Election Campaign Financing	_	\$5.00	•	1
23	28					Trust Fund Contribution		Added t	•	
Zip	Country					8. This corporation owes the current year intangible				
24	25 29 30			Personal Property Tax			· · · · · · · · · · · · · · · · · · ·			┦
	9. Name and Address of Current I	<u> </u>		81 Name		10. Name and Address of New Re	egistered A	gent		ł
TO	ao Farmo	TOC	[]
				82 Street Address (P.O. Box Number is Not Acceptable)						
			ŀ	83						1
				na City				Tor Zin (Codo	-
				84 City			FL	85 Zip C	Jode	
11. Pursuant	to the provisions of Sections 607.0502 a	and 607,1508, Florida Statu	ites, the ab	ove-named	corpora	ation submits this statement for the p	urpose of c	hanging its	registered	1
	nm familiar with, and accept the obligation				Joration	s board of directors. Thereby accept	ше аррош	THEIR AS 10	gistored	
SIGNATURE										
12.	Signature, typed or printed name of registered agent a OFFICERS AND	·	E: Registered /	igent signature	required w	hen reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	DRS IN 12	í
TITLE T	Inan Farmo		1.1 TIII	.E	Τ	ADDITIONO(O) INVOCES TO OTT	IOLITO AITE	Change	Addition	R2E034 (11/98)
NAME	الرائد الأحاد ال	P CATESIO		1.2 NAME				_		2
STREET ADDRESS	1020 2 5 141		1.3 STF	EET ADDRESS						6
CITY-ST-ZIP	Ft.Lauderdal	<u>e,FL3331(</u>	1.4 CIT	Y-ST-ZIP						2
IIITE \mathcal{D}	Stephen Sec	DELETE	2.1 ΠΠ	E				☐ Change	☐ Addition	0
NAME	11050 S.E. 174	NS+ #310								
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CITY-ST-ZIP	- Lauder date	2, FL33316	2.4 CIT	Y-ST-ZIP				Change	Addition	1
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CITY-ST-ZIP	Ft Lauderda	10. FL3331	/	Y-ST-ZIP						
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NAME			4. 2 NA	4. 2 NAME						ĺ
STREET ADDRESS			4.3 STR	EET ADDRESS	-[
CITY-ST-ZIP				4.4 CITY-ST-ZIP						
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NAME										İ
STREET ADDRESS				5.3 STREET ADDRESS 5.4 CITY-ST-ZIP						
CITY-ST-ZIP		☐ DELETE		5.4 CITY-ST-ZIP 6.1 TITLE				Change	☐ Addition	1
NAME			6.2 NAM							
STREET ADDRESS			6.3 STR	EET ADDRESS						1
				6.4 CITY-ST-ZIP					ĺ	i
	<u> </u>					No. 440 07(0)() Florida Otal 4-1 16				

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;