

CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

APPROVED  
AND  
FILED

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99 NOV - 1 PM 4:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P98000075955

1. Corporation Name  
SEA & SKI HOLDINGS, INC.

Principal Place of Business  
8180 NW 36TH ST, SUITE 105  
MIAMI FL 33166

Mailing Address  
8180 NW 36TH ST, SUITE 105  
MIAMI FL 33166



8/26/99 90009 011 \$550  
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21. Suite, Apt #, etc.	26. Suite, Apt #, etc.	05-0942403	Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23. Zip	28. City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24. Country	29. Zip	8. This corporation owes the current year Intangible Personal Property.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
30. Country	31. Zip		

9. Name and Address of Current Registered Agent  
PARKER, CLAYTON E  
%KIRKPATRICK & LOCKHART LLP  
201 S BISCAYNE BLVD, SUITE 2000  
MIAMI FL 33131

10. Name and Address of New Registered Agent  
81 Name BARRY J. HECHTMAN  
82 Street Address (P.O. Box Number is Not Acceptable) SUITE 210  
83 8100 S.W. 81 DRIVE  
84 City MIAMI FL 85 Zip Code 33143

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: *[Signature]* DATE: 8/23/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	President
STREET ADDRESS		1.3 STREET ADDRESS	BILL ROBERT
CITY-ST-ZIP		1.4 CITY-ST-ZIP	8180 N.W. 36 STREET #210 MIAMI, FL 33166
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	V.P. Robert CANORI
STREET ADDRESS		2.3 STREET ADDRESS	8180 NW 36 ST #105
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI FL 33166
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* Bill Robert Bell President 8/23/99 305-436-5510  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/99)



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To: Florida Department of State  
Division of Corporations  
Annual Reports/Reinstatement Section  
PO Box 6327  
Tallahassee, Florida 32314

From: Jeff Fletcher  
c/o Sea & Ski Corporation  
8180 NW 36<sup>th</sup> Street, Suite 105  
Miami, Florida 33133-6650

Subject: Notice of Administrative Dissolution or Revocation  
Sea & Ski Holdings

Date: 10/21/99

To Whom It May Concern:

Sea & Ski has received your notice of administrative dissolution or revocation for failure to file its 1999 corporation annual report form as required by law.

Please be advised that the form was properly filed. Enclosed is a copy of the filing, and also copies of the front and back of the cancelled check used for payment.

Please note that the above filing accompanied two other filings for corporations related to Sea & Ski Holdings. The filings were for Sea & Ski Delaware, and for Sea & Ski Corporation. Copies of these reports and their related cancelled checks are also enclosed.

Please use this information to reinstate Sea & Ski Holdings' legal status for authorization to transact business in the State of Florida.

Thank you,

Jeff Fletcher  
Corporate Controller  
Sea & Ski Corporation

copy:  
Stuart Streger  
Chief Operating Officer, Sea & Ski Corporation

Fla Dept of State.doc

Handwritten signature: Jeff Fletcher