2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **P99000001961** May 02, 2000 8:00 am **Secretary of State** STRIKER YACHT BROKERAGE INTERNATIONAL CORP. 05-02-2000 90029 036 ***150.00 Mailing Address Principal Place of Business 1515 S.E. 17TH ST. 1515 S.E. 17TH ST. STE. A131 **STE. A131** FORT LAUDERDALE FL 33316-1736 FORT LAUDERDALE FL 33316 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0886833 Nőt Applicable Country Country \$8,75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. D ☐ Change ☐ Addition TITI F TITLE ☐ Delete LAMARR, JACK MARKE NAME STREET ADDRESS STREET ADDRESS 2601 EAST OAKLAND PARK BLVD. CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33306 ☐ Change ☐ Addition TITLE ☐ Delete TITLE ENNIS, EDWARD JR. NAME STREET ADDRESS STREET ADDRESS 5131 RAEFORD CITY-ST-ZIP CITY-ST-ZIP **FAYETTEVILLE NC 28304** - Change Addition ☐ Delete TITLE PURVIS, GEORGE JR. NAME STREET ADDRESS 1223 PEMBROKE JONES STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WILMINGTON NC 28405** Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 report or supplemental report is true and accurate and that y 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 an appears in Block 11 or Block 12 in the corporation of the corporation of the receiver changed, or on an attachment with an ad-