

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90087 024 ***150.00

DOCUMENT # P99000052053

1. Entity Name

SHARK CHARTERS, INC.

Principal Place of Business

**10800 COLLINS AVENUE
 MIAMI BEACH FL 33154**

Mailing Address

**10800 COLLINS AVENUE
 MIAMI BEACH FL 33154-1006**

2. Principal Place of Business

10900 COLLINS Ave

Suite, Apt. #, etc.

3. Mailing Address

5641 LINCOLN ST

Suite, Apt. #, etc.

City & State

MIAMI BEACH FL 33154

City & State

HOLLYWOOD FLA,

4. FEI Number

65-0923479

Applied For

Not Applicable

Zip

33154

Country

DADE

Zip

33021

Country

BROWARD

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KUHN, ROGER K
 10800 COLLINS AVENUE
 MIAMI BEACH FL 33154**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Roger K KUHN

Roger K. Kuhn

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE Delete
D
 NAME **KUHN, ROGER K**
 STREET ADDRESS **10800 COLLINS AVENUE**
 CITY-ST-ZIP **MIAMI BEACH FL 33154**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roger K KUHN *Roger K. Kuhn*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/15/2000

Daytime Phone #

305 949-2948

CR2E034 (9/99)