2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 19, 2001 8:00 am **DOCUMENT # P99000089385 Secretary of State** 1. Entity Name BAR BOATING CORPORATION 03-19-2001 90500 049 ***150.00 Principal Place of Business Mailing Address 222 LAKEVIEW AVE., 17TH FLOOR 222 LAKEVIEW AVE., 17TH FLOOR W. PALM BEACH FL 33401 W. PALM BEACH FL 33401 N0026902 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Gardens Corporate Center Gardens Corporate Center 3801 PGA Boulevard, Suite 555 3801 PGA Boulevard, Suite 555 4. FÉI Number Applied For 65-0952140 Palm Beach Gardens, FL 33410 Palm Beach Gardens, FL 33410 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent REGSERV CORP. REGSERV CORP. 222 LAKEVIEW AVE., 17TH FLOOR Gardens Corporate Center W. PALM BEACH FL 33401 3801 PGA Boulevard, Suite 555 Palm Beach Gardens, FL 33410 Zip Code d office or registered agent, or both, in the State of Florida. 8. The above REGSERV CORP Agent signature required when reinstating) 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, 2001 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 12. 11. OFFICERS AND DIRECTORS **DPS** X Change ☐ Addition Delete TITLE D P S TITLE Bruce A. Rendina Gardens Corporate Center 3801 PGA Boulevard, Suite RENDINA, BRUCE A NAME NAME 222 LAKEVIEW AVE., 17TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP W. PALM BEACH FL 33401 <u>Palm Beach Gardens,</u> ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change 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-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TIT! F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President