

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

FILED

**Apr 01 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S07993 (6)
 1. Corporation Name
BEACHSIDE WATERSPORTS, INC.



Principal Place of Business 3841 N. ROOSEVELT BLVD. C/O HOLIDAY INN BEACHSIDE KEY WEST FL 33040 US	Mailing Address P.O. BOX 2582 KEY WEST FL 33045 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 10/22/1990	
4. FEI Number 65-0224065	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**STEVEN F CLARKE
 22746 PRIVATEER DR
 SUMMERLAND KEY FL 33042**

10. Name and Address of New Registered Agent

81 Name MITCHELL DENKER
82 Street Address (P.O. Box Number is Not Applicable) 12130 SE 47th AVE
83
84 City Belleview
85 State FL
86 Zip Code 34991

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: *Mitchell Denker* DATE: **3/18/98**

12. OFFICERS AND DIRECTORS

TITLE	P/D <input checked="" type="checkbox"/> DELETE
NAME	THOMAS, JOHN W
STREET ADDRESS	21051 6TH AVE. CUDJOE GARDENS
CITY-ST-ZIP	SUMMERLAND KEY FL
TITLE	VP/D <input type="checkbox"/> DELETE
NAME	DENKER, MITCHELL
STREET ADDRESS	PO BOX 999 N/A
CITY-ST-ZIP	SUMMERFIELD FL 34492
TITLE	ST <input checked="" type="checkbox"/> DELETE
NAME	CLARKE, STEVEN F
STREET ADDRESS	22746 PRIVATEER DR.
CITY-ST-ZIP	SUMMERLAND KEY FL 33042
TITLE	D <input type="checkbox"/> DELETE
NAME	ROLLI, JOHN
STREET ADDRESS	PO BOX 2582 N/A
CITY-ST-ZIP	KEY WEST FL 33045
TITLE	D <input type="checkbox"/> DELETE
NAME	SQUIRES, GEORGE
STREET ADDRESS	PO BOX 2582 N/A
CITY-ST-ZIP	KEY WEST FL 33045
TITLE	D <input type="checkbox"/> DELETE
NAME	SAUNDERS, SCOTT
STREET ADDRESS	2027 FLAGLER AVE.
CITY-ST-ZIP	KEY WEST FL 33040

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	GARY HAAS
1.3 STREET ADDRESS	2200 FOGARTY
1.4 CITY-ST-ZIP	KEY WEST FL. 33040
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	DENNIS DERCOLE
3.3 STREET ADDRESS	2200 FOGARTY AVE
3.4 CITY-ST-ZIP	KEY WEST FLA. 33040
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mitchell Denker* DATE: **3/19 305294065**

CR2E034 (10/97)