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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S24380

(5)

HARBORMASTER OPERATING CORP.

**FILED** May 09 1997 8:00am Secretary of State



Principal Place of Business Mailing Address				L SADISBAG VIDE HYDRY GLOCAL BOSIL II					
	URSIDE DRIVE	2600 DOUGLAS RD							
LONGBOAT H	(ET FL 34228	803 Coral Gables FL 3313	1-6134						
		US			Date Incorporated or Qualified     01/10/1991		ate of Last F /01/1996	leport	
	Place of Business	2a. Mailing Address	<del></del>	· · · · · · · · · · · · · · · · · · ·	4. FEI Number			oplied For	
21		26			59-3058147	<b>59-3058147</b> Not Applicable			
Suite, Ap	1 #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City 8 Sta	ale	City & State		6. Election Campaign Financing		\$5.00 May Be			
23		28	<del>,</del>		Trust Fund Contribution			to Fees	
Z:ρ 	Country	Zip		intry	8. This corporation has liability for			. 1 <b>9</b> 9.032,	
24	25 Name and Address of Curre	[29]	30	<del></del>	Florida Statutes  10. Name and Address of New I		∐ No		
		aut uediateten võeut		81 Nam		zeñistetea	Agent		
	ISENAULT, KENNETH G JR			OI INDI	er en				
	5 ULMERTON ROAD			82 Stree	t Address (P.O. Box Number is Not Accept	able)			
	ITE 4-A			83					
LA	RGO FL 34641			65					
				84 City		FL	85 Zip	Code	
		007 4500 51 11 0			d corporation submits this statement for the				
agent. I StGNATURE	•				orporation's board of directors. I hereby account of the second of the s	DATE			
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12	
TITLE	DP	☐ DELETE	1.1 T	TLE			Change	Addition	
NAME	VERNON, WILLIAM G		1.2 N	AME	· [				
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CITY - ST - 7IP	MIAMI FL			ITY-ST-ZIP			- <del></del>	F-3	
1 TL <del>E</del>	DST	☐ DELETE	2.1 T	TLE			∐ Change	Addition	
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CITY-ST-ZIP				ITY-ST-ZIP					

14. I do 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.

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