

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montemayor
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S41659**

(1)

1. Corporation Name

BOAT SEATS INTERNATIONAL, INC.

Principal Place of Business

**879 WEST 77TH STREET
HIALEAH FL 33014**

Mailing Address

**879 WEST 77TH STREET
HIALEAH FL 33014**

APPROVED
AND
FILED

95 MAY -1 11 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/29/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0347051

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**FONT, LYDIA J.
879 WEST 77TH STREET
HIALEAH FL 33014**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of Registered Agent)

(Signature of Registered Agent)

(Signature of Registered Agent)

12. OFFICERS AND DIRECTORS

12.1 NAME

12.2 STREET ADDRESS

12.3 CITY, ST, ZIP

12.4 NAME

12.5 STREET ADDRESS

12.6 CITY, ST, ZIP

12.7 NAME

12.8 STREET ADDRESS

12.9 CITY, ST, ZIP

12.10 NAME

12.11 STREET ADDRESS

12.12 CITY, ST, ZIP

12.13 NAME

12.14 STREET ADDRESS

12.15 CITY, ST, ZIP

12.16 NAME

12.17 STREET ADDRESS

12.18 CITY, ST, ZIP

12.19 NAME

12.20 STREET ADDRESS

12.21 CITY, ST, ZIP

12.22 NAME

12.23 STREET ADDRESS

12.24 CITY, ST, ZIP

12.25 NAME

12.26 STREET ADDRESS

12.27 CITY, ST, ZIP

12.28 NAME

12.29 STREET ADDRESS

12.30 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME

13.2 STREET ADDRESS

13.3 CITY, ST, ZIP

13.4 NAME

13.5 STREET ADDRESS

13.6 CITY, ST, ZIP

13.7 NAME

13.8 STREET ADDRESS

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13.27 CITY, ST, ZIP

13.28 NAME

13.29 STREET ADDRESS

13.30 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(5)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a made under oath. That I am an officer or director of the corporation or the owner or holder empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 and changed, or on an attachment with an address.

SIGNATURE

(Signature and Typed Name of Signing Officer or Director)

4/29/95 635 7501