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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S75869** (5)

1. Corporation Name

KEY LARGO BOAT MART, INC.



Principal Place of Business

Mailing Address

**99285 OVERSEAS HWY
KEY LARGO FL 33037
US**

**99285 OVERSEAS HWY
KEY LARGO FL 33037
US**

3. Date Incorporated or Qualified
08/23/1991

3a. Date of Last Report
02/13/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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25

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DELATORRE, ELIAS, III
199 ATLANTIC BLVD.
KEY LARGO FL 33037**

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 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE *Elias Delatorre III*

ELIAS DELATORRE III

4/10/96

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
DELATORRE, ELIAS, III
199 ATLANTIC BLVD.
KEY LARGO FL**

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
DELATORRE, LESLIE
199 ATLANTIC BLVD.
KEY LARGO FL**

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Secretary

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
DELATORRE, DENNIS
199 ATLANTIC BLVD.
KEY LARGO FL**

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Treasure

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11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

**ELIAS DELATORRE JR.
199 Atlantic Blvd.
Key Largo, FL. 33037**

15 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Leslie Delatorre*

LESLIE DELATORRE **4/10/96**

305-451-3300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)