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

**CORPORATION ANNUAL REPORT** 

1998



ELORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

V41004

(5)

LAZZARA INTERNATIONAL YACHT SALES, INC.

## **FILED** Apr 16 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address			T TODAY BYLONY OLDDY CLEAN DENIX DOTHY DIEN BYENY BYDNY DYDNY DYDAY (BOX)		
5300 W TYSON AVENUE		5300 W TYSON AVENUE	5300 W TYSON AVENUE					
TAMPA FL 33611		TAMPA FL 33611				DO NOT WINTE IN TUR	204.05	
US		US	US			DO NOT WRITE IN THIS SPACE		
						3. Date incorporated or Qualified		
2, Principal Place of Business 28. Mailing Address						05/29/1992 4. FEI Number		N - 1: - 1 = -
21		h 1	26				-	Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.			59-3125772		Not Applicable  Additional
22			27			5. Certificate of Status Desired		Required
City & State		City & State				6. Election Campaign Financing		
23		28				Trust Fund Contribution	φυ.υυ Adder	May Be to Fees
Zip	Country	Zφ	ıp Cour			8. This corporation owes or has paid the cui		
24	25	29	30			Personal Property Tax due June 30. Yes No		
	g, Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registered Agent		
LAZ	zara steven b	·		81	Name			
5250 W TYSON AVE				82	Street Ad	idress (P.O. Box Number is Not Acceptable)		
	IPA FL 33611		[		Direct Au	raises (F.O. Dox Number is Not Acceptable)		İ
			Ī	83				
			-		0:1			
				B4	City	FL	<b>85</b> Zip	Code
11. Pursuani t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the ab	OVB-	named co	progration submits this statement for the nurnose of	changing	its registered
office or re agent. I ar	o <b>gister</b> ed agent, or both, in the Stat mi <b>ta</b> miliar with land accept the obli	e of Florida, Such change was gations of, Section 607,0505. F	authorized Iorida Statu	l by t ites.	he corpor	ration's board of directors. I hereby accept the app	ointment a	s registered
SIGNATURE	•	.,						
SIGNATURE _	Signature type dior proded home of registeric dia	jent and Chiral applicable (NO	H Ringintered	Agent	signature rec	quired when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	ĊS	L DELETE	1.1 TITL	LF			Change	Addition
NAME	Lazzara, steven b		1.2 NAN	٧ŧ				
STREET ADDRESS	5250 W TYSON AVE		1.3 STR	REFT AL	DORESS			li
CITY-ST-ZIP	TAMPA FL		1.4 CIT	Y-\$1-	ZIP			
TITLE		L DELETE	2.1 1(1)	LF	l		☐ Change	Addition
NAME			2 2 NAN	ME				1
STREET ADDRESS			2 3 STR	EET AC	DDRESS			
CITY-ST-ZIP		·	2 4 CFI	Y - \$1 -	ZIP			
TITLE		☐ OELETE	3.1 TITL	.E	1		L Change	Addition
NAME			3.2 NAM	νŒ				
STREET ADDRESS			3 3 SIR	EET AI	DDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	3.4.00		ZIP			
TITLE		☐ DELETE	4 1 111L	-ŀ			Change	☐ Addition
NAME			4 2 NA	MÉ				
STREET ADDRESS			4 3 S1R	EET AE	ODRESS			1
CITY-ST-ZIP			4.4 CITS	Y-ST-	ZIP			
TITLE		DELETE	5.1 TITL	F			Change	☐ Addition
NAME			5.2 NAM	ΛE				
STREET ADDRESS			5.3 STR	EFI AC	DDRESS			
CITY-ST-ZIP			5.4 CITY	Y-\$1-	ZIP			
TITLE		☐ DELETE	6.1 7111	F			☐ Change	☐ Addition
NAME			6.2 NAM	AE .				ĺ
STREET ADDRESS			6.3 SIRI	EET AD	DDRESS			
CITY-ST-ZIP			6.4 Cil y					
14. I hereby ce	ertify that the information supplied v	vith this filing does not qualify f	or the exen	nptic	n slated i	in Section 119.07(3)(i), Florida Statutes. I further ce	tify that th	e information

ic and accurate and that my signature shall have the same legal effect as if made under oath, that I am an owered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in