

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUL -3 AM 8:19

DOCUMENT # V46310 (1)

1. Corporation Name
THE FISHING SPOT, INC.

Principal Place of Business
**200 NE 21ST AVE
DEERFIELD BEACH FL 33441**

Mailing Address
**200 NE 21ST AVE
DEERFIELD BEACH FL 33441**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/22/1992	3a. Date of Last Report 05/01/1994
4. FCI Number 65-0335883	Approved 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, within the information has received 5-11-93 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 20
State Apt # etc 22	State Apt # etc 27
City & State 23	City & State 28
Zip 24	Zip 29
City 25	City 30

9. Name and Address of Current Registered Agent

**DEBRINO, JAMES
1109 S.E. 12TH STREET
DEERFIELD BEACH FL 33441**

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 607.1506, 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 hereby authorized to accept the obligations of Section 607.0606, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent and New Agent)

(Signature of Registered Agent or Registered Agent and New Agent)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	NAME DEBRINO, JAMES STREET ADDRESS 1109 S.E. 12TH STREET CITY, STATE, ZIP DEERFIELD BEACH FL 33441	1. TITLE ☐ Change ☐ Addition	
TITLE V	NAME DEBRINO, DARREN STREET ADDRESS 1319 S.E. 4TH AVENUE CITY, STATE, ZIP DEERFIELD BEACH FL 33441	2. TITLE ☐ Change ☐ Addition	
TITLE ST	NAME DEBRINO, KATHLEEN STREET ADDRESS 1109 S.E. 12 STREET CITY, STATE, ZIP DEERFIELD BEACH FL 33441	3. TITLE ☐ Change ☐ Addition	
TITLE V	NAME DEBRINO JAMES C STREET ADDRESS 3020 INDIAN TRAIL CITY, STATE, ZIP LANTANA FL	4. TITLE ☐ Change ☐ Addition	
TITLE	NAME STREET ADDRESS CITY, STATE, ZIP	5. TITLE ☐ Change ☐ Addition	
TITLE	NAME STREET ADDRESS CITY, STATE, ZIP	6. TITLE ☐ Change ☐ Addition	
TITLE	NAME STREET ADDRESS CITY, STATE, ZIP	7. TITLE ☐ Change ☐ Addition	
TITLE	NAME STREET ADDRESS CITY, STATE, ZIP	8. TITLE ☐ Change ☐ Addition	

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 119.07(1)(b), Florida Statutes. I further certify that the information submitted on this annual report or biennial 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 registered or inactive corporation to provide this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on its supplemental filing.

SIGNATURE:
SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

5-31-95

705-426-9206