

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

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**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified

06/22/1992

3a. Date of Last Report

07/03/1995

4. FET Number

65-0335883

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

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 607.0502 and 607.1508, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

(If filer is Registered Agent, Signature required when changing status)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ DELETE

**V
DEBRINO, DARREN
1319 S.E. 4TH AVENUE
DEERFIELD BEACH FL 33441**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

**ST
DEBRINO, KATHLEEN
1109 S.E. 12 STREET
DEERFIELD BEACH FL 33441**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ DELETE

**V
DEBRINO JAMES C
3020 INDIAN TRAIL
LANTANA FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
☐ Change ☒ Addition

**V.P.
Christie Ann DeBrino
1109 S.E. 12th Street
Deerfield Beach, Fla. 33441**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

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

Kathleen DeBrino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kathleen DeBrino

1/29/96

954-426-9206

Date

Telephone

CR2E034 (12/95)