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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

YACHTIES JEWELRY & LOAN, INC.

(2)

FILED Apr 23 1998 8:00am Secretary of State

Principal Place 200 HWY, 98	e of Business	Mailing Address P. O. BOX 1280			- 10011 Atten Dues 11/06 11/1 (#18/8 1/01 #1011 BID	re grace grace greis gener fan
DESTIN FL 32541		DESTIN FL 32540				
		U\$			DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
					09/14/1992	
2. Principal P	2a. Mailing Address	ng Address		4. FEI Number	Applied For	
21 26 Suite, Apt. #, etc. Suite. Apt. #, etc.			-1-		59- <u>3116352</u>	Not Applicable
					5. Certificate of Status Desired	\$8.75 Additional
		City & State	City & State			Fee Required
23		 - 	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Zip			8. This corporation owes or has paid the co	
24	25		30			Yes No
14MI	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	Agent
	F, ROY D.		81	Name		
200HIGHWAY 98 Destin Fl 32541			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
OL	31114 P.C 32341		83			
			84	City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Statute	s, the abov	/e-named cor	noration submite this statement for the numbers	of changing its registered
Office of r	egister ed agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was a	ulhorized b	v the corpora	ation's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE						
	Stgnature, typed or printed name of registered agr			jont signature requ	ired when reinstating) DATE	
12.	PD OFFICERS AN	OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AN	
NAME	WILE DOVD		1.1 TITLE 1.2 NAME			Change Addition
STREET ADDRESS	200 HWY. 98 EAST		1.2 NAME 1.3 STREET ADDRESS			
CITY-ST-ZIP	ncetin ci		1.4 CITY-			
TITLE	STD	DELETE	2.1 TITLE	O. E.		Change Addition
NAME	WILF, SHARON		2.2 NAME			
STREET ADDRESS	200 HWY. 98 EAST 238		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	DESTIN FL		2. 4 CITY-	ST-ZIP		
TITLE	Í TÖNV AGUED	ACUED 3.1 TI				Change Addition
NAME	TONY ASHER 200 HWY 98, EAST		3.2 NAME			
STREET ADDRESS	DESTIN FL		1	T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	DELETE 4.1 TITLE			Change Addition
NAME			4.7 TILE 4. 2 NAME			L Change Addition
STREET ADDRESS				I ADDRESS		ļ
CITY-ST-ZIP			4.4 CiTY-1			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			·
STREET ADDRESS	ESS 533		5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - 8	ST-ZIP		
TITLE	DELETE 6.		6.1 TALE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET			
CITY-ST-ZIP	artific that the information and the	4. 4.2. 10	6.4 CITY - 9	ST- ZIP		

I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true find does not 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 trusters and that my name appears in Block 12 or Block 13 if changer, or on an attachment with an additional statement with a statement with