

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 521187

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: COMPLETE YACHT SERVICE, INC.

**Current Principal Place of Business:**

200 SW 33RD STREET  
FT. LAUDERDALE, FL 33315

**New Principal Place of Business:**

**Current Mailing Address:**

200 SW 33RD STREET  
FT. LAUDERDALE, FL 33315 US

**New Mailing Address:**

FEI Number: 59-1728577      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MALO, MARK T  
200 S.W. 33 STREET  
FORT LAUDERDALE, FL 33315 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MALO, KATHLEEN  
Address: 420 E TROPICAL WAY  
City-St-Zip: PLANTATION, FL 33317

Title: PD      ( ) Delete  
Name: MALO, MARK T  
Address: 420 E TROPICAL WAY  
City-St-Zip: PLANTATION, FL 33317

Title: D      ( ) Delete  
Name: O'DONNELL, SUSAN  
Address: 9187 W SUNRISE BLVD  
City-St-Zip: PLANTATION, FL 33322

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK MALO

PD

01/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date