2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

-Jan 28, 2004 08:00 AM **DOCUMENT # 562815 Secretary of State** 1. Entity Name YACHTING PROMOTIONS-GULF, INC. Principal Place of Business Mailing Address 1115 NE 9TH AVENUE 1115 NE 9TH AVENUE FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #. etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 59-1802910 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PEARSON, KAYE Street Address (P.O. Box Number is Not Acceptable) 1115 NE 9TH AVENUE FT. LAUDERDALE FL 33304 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TEST ☐ Change Addition NAME PEARSON, KAYE MAME U00000016829 STREET ADDRESS 1115 NE 9TH AVE STREET ADDRESS 01/28/04-80071-022 150.00 CITY - ST- ZIP FT. LAUDERDALE FL CITY-ST-70P ☐ Change Addition Detete THEE TITLE NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Change Addition TITLE Delete MANAS. MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete STRE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CBY+ST-7/2 CRTY-ST-ZIP ME Change Addition Telete TISSE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CATY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Kaye A. Pearson

SIGNATURE:

FILED

1-21-04 954764.7642