

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000069500

Entity Name: CALL TIME MARINE, INC.

FILED  
May 19, 2005  
Secretary of State

**Current Principal Place of Business:**

13939 N.W. 1ST AVENUE  
MIAMI, FL 331684813

**New Principal Place of Business:**

**Current Mailing Address:**

13939 N.W. 1ST AVENUE  
MIAMI, FL 331684813

**New Mailing Address:**

FEI Number: 20-1162003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CATES, ANNE L  
13939 N.W. 1ST AVENUE  
MIAMI, FL 331684813 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JONES, DARELL  
Address: 13815 NW. 19TH AVENUE  
City-St-Zip: OPA-LOCKA, FL 33054

Title: V ( ) Delete  
Name: LACOSTE, EDWARD  
Address: 3358 N.W. 68TH COURT  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: ST ( ) Delete  
Name: CATES, ROBERT B  
Address: 13939 N.W. 1ST AVENUE  
City-St-Zip: MIAMI, FL 331684813

**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 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 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: ROBERT B CATES

ST

05/19/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date