2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000002182 1. Entity Name

EAST COAST YACHT DETAILS, INC.



FILED Apr 14, 2008 08:00 A Secretary of State

CR2E034 (11/05)

Fee Required

Principal Place of Business

303 SEMINOLE PALMS DR. GREENACRES, FL 33463

Mailing Address

303 SEMINOLE PALMS DR. GREENACRES, FL 33463



DO NOT WRITE IN THIS SPACE

No Chg-P 04102008 Applied For 4. FEI Number 20-4091602 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

WOOD, ROBERT A. 303 SEMINOLE PALMS DR. GREENACRES, FL 33463

DO NOT WRITE IN THIS SPACE

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				d Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	U00000893944 04/24/08-80008-010 150.00	
10. OFFICERS AND DIRECTORS						
NAME STREET ADDRESS CITY-ST-ZIP	DP WOOD, ROBERT A. 303 SEMINOLE PALMS DR. GREENACRES, FL 33463					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WOOD, MARY E. 303 SEMINOLE PALMS DR. GREENACRES, FL 33463				•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•	
12. hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119 Florida Statutes. Uniting certify that the information.						

indicated on this report or supplemental report is true and accurate and that my signature shall have the same little of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, indicate, indicate, in 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 changed or on an all achine it with an address, with all other like empowered.

Nata April 08 M