


2005 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 15, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000005826
 1. Entity Name
BOCA MARITIME, INC.



Principal Place of Business 3020 N MILITARY TR 100 BOCA RATON, FL 33431 US	Mailing Address 3020 N MILITARY TR 100 BOCA RATON, FL 33431 US
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01122005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0807417	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SARGENTS, HARRY JR
 3020 N MILITARY TR #100
 BOCA RATON, FL 33431

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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 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SARGEANT, HARRY JR 3020 N MILITARY TRAIL #100 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO SARGEANT, JANET 3020 N MILITARY TRAIL #100 BOCA RATON, FL 33431
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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.

SIGNATURE: *Harry Sargeant* **HARRY SARGEANT** 2/10/05 561-999-9916
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #