## 2008 FOR PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OF

## FILED ANNUAL REPORT Feb 14, 2008 08:00 AM **DOCUMENT # P98000005826 Secretary of State** 1. Entity Name BOCA MARITIME, INC. Principal Place of Business Mailing Address 3020 N MILITARY TR 3020 N MILITARY TR 100 BOCA RATON, FL 33431 BOCA RATON, FL 33431 CR2E034 (11/05) 01072008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0807417 Not Applicable \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent SARGENTS, HARRY JR DO NOT WRITE 3020 N MILITARY TR #100 BOCA RATON, FL 33431 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 Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees "OFFICERS AND DIRECTORS 10. TITLE SARGEANT, HARRY JR NAME STREET ADDRESS 3020 N MILITARY TRAIL #100 000000827425 02/21/08-80089-023 158.75 BOCA RATON, FL 33431 CITY-ST-ZIP TILE SARGEANT, JANET NAME 3020 N MILITARY TRAIL #100 STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33431 TITLE MALIF STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I nereby certify that the information supplied with this filing does/not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trystee 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.

561-999-9916