

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 283125

FILED
Feb 25, 2004
Secretary of State

Entity Name: MASTRY MARINE AND INDUSTRIAL SUPPLY, INC.

Current Principal Place of Business:

2801 ANVIL ST N
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

2801 ANVIL ST N
SAINT PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-1083881

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTRY, CONSTANTINE E.
8360 -73RD CT
PINELLAS PARK, FL 33781 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: MASTRY, RICHARD,
Address: 2220 PINELLAS PT DR
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: PD () Delete
Name: MASTRY, CONSTANTINE, E.
Address: 8360 73RD COURT
City-St-Zip: PINELLAS PARK, FL 33781

Title: SD () Delete
Name: MASTRY, ADIB A.,
Address: 1281 79TH ST S
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: TD () Delete
Name: YARNS, DOUGLAS W
Address: 5725 12TH AVE #301D
City-St-Zip: SAINT PETERSBURG, FL 33710

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:

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: DOUGLAS W. YARNS

TD

02/25/2004

Electronic Signature of Signing Officer or Director

Date