2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# 304786

Entity Name: BRADFORD MARINE, INC.

Current Principal Place of Business:

3051 STATE ROAD 84
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

3051 STATE ROAD 84
FT. LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 59-1141882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOUGLAS, GENE
3051 STATE RD 84
FT. LAUERDALE, FL 33312 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

OFFICERS AND DIRECTORS:

Title:	CD	( ) Delete
Name:	COSMAN, DIETER	
Address:	3051 ST ROAD 84	
City-St-Zip:	FT LAUDERDALE, FL 33312	
Title:	PD	( ) Delete
Name:	ENGLE, PAUL	
Address:	3051 STATE ROAD 84	
City-St-Zip:	FORT LAUDERDALE, FL 33312	
Title:	V	( ) Delete
Name:	KRIGGER, THOMAS	
Address:	3051 STATE RD 84	
City-St-Zip:	FT. LAUDERDALE, FL 33312	
Title:	V	( ) Delete
Name:	DOUGLAS, GENE	
Address:	3051 STATE ROAD 84	
City-St-Zip:	FT LAUDERDALE, FL 33312	
Title:	V	( ) Delete
Name:	THOMAS, TOM	
Address:	3051 STATE ROAD 84	
City-St-Zip:	FT LAUDERDALE, FL 33312	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	V	( ) Change (X) Addition
Name:	NITABACH, KATHLEEN	
Address:	3051 STATE ROAD 84	
City-St-Zip:	FT LAUDERDALE, FL 33312	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TOM THOMAS V 04/24/2008

Electronic Signature of Signing Officer or Director — Date