
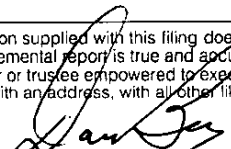


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2007 8:00 am
Secretary of State

07-30-2007 90062 037 ***558.75

DOCUMENT # 442081			
1. Entity Name BERG YACHT SALES COMPANY			
Principal Place of Business 555 NE 15TH ST MIAMI, FL 33132		Mailing Address 555 NE 15TH ST MIAMI, FL 33132	
2. Principal Place of Business - No P.O. Box # 555 N.E. 15th Street		3. Mailing Address 555 N.E. 15th Street	
Suite, Apt. #, etc. PH-A34		Suite, Apt. #, etc. PH-A34	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33132	Country Miami-Dade	Zip 33132	Country Miami-Dade
6. Name and Address of Current Registered Agent BERG (DAVID THEODORE) 555 NE 15TH STREET PHA 34 MIAMI, FL 33132		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BERG, DAVID T 555 NE 15TH ST MIAMI, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERG, DAVID T 555 NE 15TH ST MIAMI, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby 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 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: 		David T. Berg	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 07/26/07 Daytime Phone # (305) 379-1414	

4012100



07102007 Chg-P CR2E034 (12/06)

4. FEI Number **59-1360550** Applied For
Not Applicable

5. Certificate of Status Desired **XXX** **\$8.75** Additional
Fee Required