

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 536483

FILED
Aug 17, 2008
Secretary of State

Entity Name: GULFSTREAM TRAWLERS, INC.

Current Principal Place of Business:

1900 SE 15TH ST.
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

1329 CITRUS ISLE
FT. LAUDERDALE, FL 33315

Current Mailing Address:

1900 SE 15TH ST.
FT. LAUDERDALE, FL 33316

New Mailing Address:

1329 CITRUS ISLE
FT. LAUDERDALE, FL 33315

FEI Number: 59-1742589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, HAL
1329 CITRUS ISLE
FT. LAUDERDALE, FL 33315 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, HAL,
Address: 1900 SE 15TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: VP () Delete
Name: JONES, ANN STEVENS,
Address: 1900 SE 15 ST
City-St-Zip: FT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, HAL,
Address: 1329 CITRUS ISLE
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VP (X) Change () Addition
Name: JONES, ANN STEVENS,
Address: 1329 CITRUS ISLE
City-St-Zip: FT LAUDERDALE, FL 33315

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: HAL JONES

P

08/17/2008

Electronic Signature of Signing Officer or Director

Date