

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 571627

FILED
Apr 08, 2005
Secretary of State

Entity Name: MARINE EXHAUST SYSTEMS, INC.

Current Principal Place of Business:

3640-D FISCAL CT.
RIVIERA BCH, FL 33404

New Principal Place of Business:

3640 FISCAL CT.
RIVIERA BCH, FL 33404

Current Mailing Address:

3640-D FISCAL CT.
RIVIERA BCH, FL 33404

New Mailing Address:

3640 FISCAL CT.
RIVIERA BCH, FL 33404

FEI Number: 59-1881033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, ANGELA A
3640-D FISCAL CT.
RIVIERA BCH., FL 33404 US

Name and Address of New Registered Agent:

WOODS, ANGELA A
3640 FISCAL CT.
RIVIERA BCH., FL 33404 US

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:

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: WOODS, DARRIN
Address: 10843 HAWKVIEW CIRCLE
City-St-Zip: STUART, FL

Title: V () Delete
Name: PRIESCHL, SHEILA
Address: 9927 ROYAL CARDICAN WAY
City-St-Zip: WEST PALM BEACH, FL 33411

Title: C () Delete
Name: WOODS, WOODROW E
Address: 3640 FISCAL CT
City-St-Zip: RIVIERA BCH, FL

Title: P () Delete
Name: WOODS, ANGELA A
Address: 3640-D FISCAL CT
City-St-Zip: RIVIERA BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: WOODS, DARRIN VP
Address: 10843 HAWKVIEW CIRCLE
City-St-Zip: STUART, FL 34997 US

Title: V (X) Change () Addition
Name: PRIESCHL, SHEILA VP
Address: 9927 ROYAL CARDICAN WAY
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: C (X) Change () Addition
Name: WOODS, WOODROW E COB
Address: 3640 FISCAL CT
City-St-Zip: RIVIERA BCH, FL 33404 US

Title: P (X) Change () Addition
Name: WOODS, ANGELA A PRES
Address: 3640 FISCAL CT
City-St-Zip: RIVIERA BCH, FL 33404 US

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: ANGELA WOODS

P

04/08/2005

Electronic Signature of Signing Officer or Director

Date