



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 25, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 657335</b> 1. Entity Name <b>S &amp; S YACHT SALES, INC.</b>	
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Principal Place of Business <b>1735 SE 7TH ST. FT LAUDERDALE, FL 33316</b>	Mailing Address <b>1735 SE 7TH ST. FT LAUDERDALE, FL 33316</b>
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01142007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-1972573</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>LARSEN, STUART 1735 SE 7TH STREET FT. LAUDERDALE, FL 33316</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

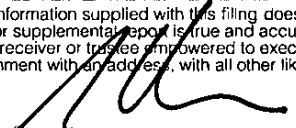
9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LARSEN, C. SUE 1735 SE 7TH STREET FT. LAUDERDALE, FL 0,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LARSEN, STUART C. 1735 SE 7TH STREET FT. LAUDERDALE, FL
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01/26/07-80110-012 150.00

**DO NOT WRITE  
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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:**  **Stuart Larsen VP** **1/22/07** **954 4630600**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #