


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 02, 2004 8:00 am**  
**Secretary of State**

04-02-2004 90021 045 \*\*\*150.00

<b>DOCUMENT # F00000004543</b>	
1. Entity Name <b>MARINE CONCEPTS OF GEORGIA, INC.</b>	

Principal Place of Business <b>2700 DELK ROAD, SUITE 100 MARIETTA, GA 30067</b>	Mailing Address <b>2700 DELK ROAD, SUITE 100 MARIETTA, GA 30067</b>
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**54025256**

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

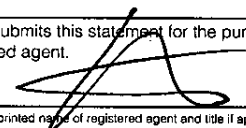


03022004 Chg-P CR2E034 (10/03)

4. FEI Number <b>58-1281924</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent <b>D'ESPIES, KEVIN J 1212 SE FIRST AVENUE FT. LAUDERDALE, FL 33316</b>	7. Name and Address of New Registered Agent Name <b>D'ESPIES, KEVIN J</b> Street Address (P.O. Box Number is Not Acceptable) <b>888 EAST LAS OLAS BLVD</b> <b>SUITE 720</b> City <b>FT. LAUDERDALE FL</b> Zip Code <b>33301</b>
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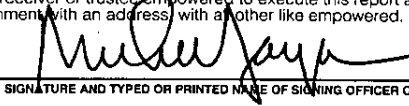
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HIRSCH, HENRY 2700 DELK ROAD, SUITE 100 MARIETTA, GA 30067 <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	DVST HIRSCH, ETTA RAE 2700 DELK ROAD, SUITE 100 MARIETTA, GA 30067 <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	<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	<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	<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	<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 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 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 another like empowered.

SIGNATURE:  Date **Mar 12, 2004** Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment  
Inc. # F00000004543  
54025256

**MONTE FINO**  
CUSTOM YACHTS, INC.



**HARGRAVE**  
CUSTOM YACHTS

**COLONIAL**  
YACHT SALES

**COLONIAL YACHT SALES, INC**

1887 West State Road 84, Ft. Lauderdale, FL 33315

Tel: (954) 463-0555 - Fax: (954) 463-8621

Date: March 2, 2004

To: Florida Department of State, Division of Corporations

From: Michael F. Joyce, President Colonial Yacht Sales, Inc

Reference: Marine Concepts of Georgia, Inc., Charter# F00000004543

Subject: Empowerment to sign Florida UBR

This is to certify that I, Michael F. Joyce am empowered to sign the Florida UBR for Marine Concepts of Georgia, Inc. as agent.

A handwritten signature in black ink, appearing to read "Michael F. Joyce".

Michael F. Joyce  
1887 West State Road 84  
Ft. Lauderdale, FL 33315