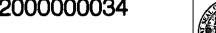
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) F0200000034 DOCUMENT # 1. Entity Name



SAVAGE YACHTS CORP.

Brown Management Inc

DBA: Savage Brown Yachts Corp Principal Place of Business

-5500 19T AVE. NORTH-ST PETENSBURG FL 33710 Mailing Address

10217 PARADISE BLVD TREASURE ISLAND FL 33706

FILED Jan 30, 2003 8:00 am **Secretary of State**

01-30-2003 90133 034 ***150.00

90013666



| Principal Place of Business 3. Mailing Address | | | | | | | - | | | |
|---|---|---------------------|--------------------|-------------------|--|---|--|---------------------------|-----------------------------|--|
| 9546 1 | W Gulf Blvd | | | | | | | | | |
| Treasure island, F1 33706 | | Suite, Apt. #, etc. | | | | | ☐ CHECK HERE IF MAKING CHANGES | | | |
| City & Stat | te | City & State | | | | 4. F | 35-1636653 | | oplied For ot Applicable | |
| Zip | Country Zi | | Zip Cour | | | 5. (| Certificate of Status Desired | \$8.75 Add Fee Require | | |
| 6. Name and Address of Current Registered Agent | | | | | | 7. Name and Address of New Registered Agent | | | | |
| | | | | | Name Kenneth W Brown | | | | | |
| BROWN, KENNETH W | | | | S | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| 5500 W. 1ST AVE NO: | | | | | 9546 W Guil Blvd Freesure island, Fl 33706 | | | | | |
| ST PETERSBURG FL 33706 | | | | | 10217 Paradise Blvd | | | | | |
| 7 4 | | | | C | Treası | sure Island, F1 33706 FL Zip Code | | | | |
| the above the obligat | e named entity submits this statement for tions of registered agent. | or the purpo | se of changing its | registered o | ffice or regis | tered age | ent, or both, in the State of Florida. I am | ı familiar with, | and accept | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applic | cable. (NOTE | E: Registered Age | nt signature requ | ired when re | instating) DATE | | | |
| Afte | ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o | f State | | | | | Election Campaign Financing Trust Fund Contribution. | | May Be | |
| 10. | OFFICERS AND DIRECTORS | | | 11. | 11. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | | |
| TITLE | PSCD | | ☐ Delete | TITLE | | | | ☐ Change | ☐ Addition | |
| NAME | BROWN, KENNETH W | | | NAME | | | | | | |
| STREET ADDRESS | 10217 PARADISE BLVD | | | STREET AD | 1 | | | | | |
| CITY-ST-ZIP | TREASURE ISLAND FL | | | CITY-ST-7 | ar | | | | | |
| TITLE | D CAMP KENN I | | ☐ Delete | TITLE | | | | Change | ☐ Addition | |
| NAME STREET ADDRESS | Brown, Kevin J 10217 Paradise Blvd | | | NAME STREET AD | DRESS | | | | | |
| CITY-ST-ZIP | TREASURE ISLAND FL | | | CITY-ST-Z | | | | | | |
| TITLE | | ~ | Delete | TITLE | | _===- | | - Change | | |
| NAME | | | | NAME | | | | | | |
| STREET ADDRESS | | | | STREET AD | DRESS | | | | | |
| CITY-ST-ZIP | } | | | CITY-ST-Z | IP I | | | | 1 | |
| TITLE | | | ☐ Delete | TITLE | | | | Change | ☐ Addition | |
| NAME | | | | NAME | | | | | | |
| STREET ADDRESS | | | | STREET AD | | | | | | |
| CITY-ST-ZIP | | | | CITY-ST-Z | IP | | | | | |
| TITLE | | | ☐ Delete | TITLE | | | | Change | ☐ Addition | |
| NAME | | | | NAME | | | | | | |
| STREET ADDRESS | | | | STREET AD | | | | | | |
| CITY-ST-ZIP | | | | CITY-ST-Z | ur | | | | | |
| TITLE NAME | | | ☐ Delete | TITLE | | | | Change | Addition | |
| STREET ADDRESS | | | | name Street ad | DRESS | | | | | |

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 appears, with pother like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR DIRECTOR