2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001922

Entity Name: HARBOUR LOBSTER AND FISH COMPANY LIMITED

Jul 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

YELLOW PINE ROAD (P.O. F-40014) 757 S.E. 17TH STREET

FREEPORT G.B. BAHÀMAS, SUITE 1004

FT. LAUDERDALE, FL 33316 US

Current Mailing Address: New Mailing Address:

P.O. BOX F-40016 P.O. BOX F-40016

FREEPORT BAHAMAS, FREEPORT BAHAMAS, BS 00000 BA

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BUTLER, JEFFREY B SR. BUTLER, JEFFREY B SR. 757 S.E. 17TH STREET 2105 NORTH 15TH AVE

HOLLYWOOD, FL 33020 US SUITE 1004

FT. LAUDERDALE, FL 33316 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: JEFFREY B. BUTLER, SR. 07/13/2007

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

BUTLER, JEFFREY B SR. BUTLER, JEFFREY B SR. Name: Name: 15 RINGWOOD DRIVE 15 RINGWOOD DRIVE Address: Address:

City-St-Zip: FREEPORT G.B. BAHAMAS, City-St-Zip: FREEPORT G.B. BAHAMAS, BS 00000 BA

VVT Title: VVT Title: () Delete (X) Change () Addition Name: BUTLER, ROBERT Name: BUTLER, ROBERT

P.O. BOX F-40016 P.O. BOX F-40016 Address: Address:

FREEPORT BAHAMAS, FREEPORT BAHAMAS, BS 00000 BA City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition MR CHRISTOPHER GOUTHRO, PA CHRISTOPHER GOUTHRO, PA Name: Name:

P.O. BOX 4-42419 P.O. BOX F-42419 Address: Address:

City-St-Zip: FREEPORT G.B. BAHAMAS, City-St-Zip: FREEPORT G.B. BAHAMAS, BS 00000 BA

Title: () Delete Title: (X) Change () Addition VIVIAN GOUTHRO PA,

VIVIAN GOUTHRO PA, Name: Name: Address: P.O. BOX 4-42419 Address: P.O. BOX F-42419

City-St-Zip: City-St-Zip: FREEPORT G.B. BAHAMAS. FREEPORT G.B. BAHAMAS, BS 00000 BA

Title: Title: () Delete (X) Change () Addition

ALBURY, COLLEEN L ALBURY, COLLEEN L Name: Name: P.O. BOX F-41851 Address: P.O. BOX F-41851 Address:

FREEPORT G.B. BAHAMAS, FREEPORT G.B. BAHAMAS, BS 00000 BA City-St-Zip: City-St-Zip:

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: JEFFREY B. BUTLER, SR. CEO 07/13/2007