## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G65033

FILED Apr 15, 2008 Secretary of State

Entity Name: TRADEWINDS MOBILE MARINE SERVICES, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	HLAND DRIVE DINA BEACH, I	FL 32034		
Current N	lailing Addres	ss:	New Mailing Addres	ss:
	HLAND DRIVE DINA BEACH, I	FL 32034		
FEI Number	: 59-2442526	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	ETTY R HLAND DRIVE DINA BEACH. I	FL 32034 US		
	•			
The above	•	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
The above	e named entity e of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
The above in the Stat	e named entity e of Florida. RE:	submits this statement for the particles of Registered Ag		ed office or registered agent, or both,  Date
The above in the Stat SIGNATU	e named entity e of Florida. RE: Electror			
The above in the Stati SIGNATU Election Ca	e named entity e of Florida. RE: Electror	nic Signature of Registered Ag	ent	
The above in the Stati SIGNATU Election Ca	e named entity e of Florida.  RE: Electror mpaign Financin  S AND DIREC  P (YORK, WAYNE 1901 HIGHLAN	nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS:	ent	Date
The above in the State SIGNATU  Election Car  OFFICER  Title:  Name:  Address:	e named entity e of Florida.  RE:  Electror  mpaign Financin  S AND DIREC  P  YORK, WAYNE 1901 HIGHLAN FERNANDINA I	nic Signature of Registered Ag g Trust Fund Contribution ( ).  TORS: ) Delete : D DRIVE 3CH, FL 32034 ) Delete EY	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: BETTY R. YORK SEC. 04/15/2008