2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State
03-29-2007 90033 033 ***150.00

DOCUMENT # H54648

1. Entity Name
MODERN DISCOUNT MARINE, INC.

Principal Place of Business	Mailing Address
%MICHAEL P SPADAVECCHIA 515 N. FEDERAL HWY FT PIERCE, FL 34950	% MICHAEL P SPADAVECCHIA 515 N. FEDERAL HWY FT PIERCE, FL 34950

03152007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2531222
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SPADAVECCHIA, P MICHAEL
515 N. FEDERAL HWY
FT PIERCE, FL 34950

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	P
NAME	SPADAVECCHIA, MICHAEL
STREET ADDRESS	3902 SW ALICE ST
CITY-ST-ZIP	PT ST LUCIE, FL 34953
TITLE	VS
NAME	YASSINE, ZOUHEIR
STREET ADDRESS	1039 ASPRI WAY
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	ST
NAME	CERRITO, ANTHONY
STREET ADDRESS	5420 N OCEAN DR #703
CITY-ST-ZIP	SINGER ISLAND, FL 33404
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: _____ 4/26/07 772-461-7285
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #