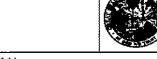
2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

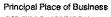
DOCUMENT # H6488 ! 1

1. Entity Name

CAPTAIN'S CHOICE MARINE, INC.



FILED Mar 18, 2004 08:00 AM Secretary of State



C/O TIM R. JOHNSON 1323 SE 17TH ST, STE 502 FT LAUDERDALE, FL 33316 Mailing Address C/O TIM R. JOHNSON 1323 SE 17TH ST, STE 502 FT LAUDERDALE, FL 33316



03102004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2602879

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

JOHNSON, TIM R. 1323 SE 17TH ST, STE 502 FT LAUDERDALE, FL 33316

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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_	Signature, typed or printed name of registered agent and title	o required when reinstating)	DATE			
File NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	onk	\$5.00 May 8e Added to Fees		
10.	OFFICERS AND DIREC	TORS			 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSON, TIM R. 1323 SE 17TH ST, STE 502 FT LAUDERDALE, FL				U00000031344 03/18/04-80005-002 150.00	
TITLE NAME STREET ADDRESS CITY - 53 - ZIP	SD JOHNSON, NINA W. 1323 SE 17TH ST., STE. 502 FT. LAUDERDALE, FL				U3/18/04-80005-002 150.00	
title Name Street Address City-St-Zip				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling 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 suppliemental 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 attacture with an address, with all other like empowered.						

CONSTRUCTION OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR