## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 19, 2005 08:00 AM Secretary of State

ANNOAL REPORT					110112,2000 00.00111.11			
DOCUMENT # K66129  1. Entity Name MORAN YACHT & SHIP, INC.				Secretary of State				
1300 SE 17	ce of Business TH ST. #204 DALE, FL 33316 US	Mailing Address 1300 SE 17TH STREET #204 FT. LAUDERDALE, FL 33316	us		X		1711 1/12/7021 // 1722)	
DO NOT WRITE IN THIS SPA			CE	03192005 No Chg-P CR2E034 (10/03)  4. FEI Number Applied For S5-0110072 Not Applied For Not Applicable  5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name and Address of Current R	egistered Agent				· · · · · · · · · · · · · · · · · · ·		
MORAN, ROBERT J.W. 1300 SE 17TH ST, SUITE #204 FT LAUDERDALE, FL 33316			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 againt and title if applicable. (NOTE Registered Againt eignature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00  9. Election Campaign Finar After May 1, 2005 Fee will be \$550.00  Trust Fund Contribution.								
10.	OFFICERS AND I	IRECTORS	1			<u>-</u> -		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MORAN, ROBERT J.W. 1300 SE 17TH STREET, #204 FT. LAUDERDALE, FL STD			-	U000003 04/19/05-8	15581 0038-017	150.00	
NAME STREET ADDRESS CITY-ST-ZIP	MORAN, SONJA 1300 SE 17TH ST., STE. 204 FORT LAUDERDALE, FL							
NAME Street address City-St-Zip					NOT W			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SP	ACE		
TITLE	1							

12. I hereby certify that the information supplied with this fitting 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 eath; that I am an officer or director of the corporation or the receiver or trusted impossing 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 attact, with an address, with all other like empowered.

SIGNATURE:

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPER OR PRINTED NAME OF SIGNANG OFFICER OR CHRECTOR

3/21/05 (954) 768-0707