

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# K97528

Entity Name: HARBOUR MARINE SYSTEMS, INC.

FILED
Jul 22, 2008
Secretary of State

Current Principal Place of Business:

2011 NW 89 PLACE
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

2011 NW 89 PLACE
DORAL, FL 33172

New Mailing Address:

FEI Number: 65-0125701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIGNON, CHRISTOPHE
2011 NW 89 PLACE
DORAL, FL 33172 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COTTE, ALAIN P
Address: 27/41 BLVD LOUISE MICHEL
City-St-Zip: GENNEVILLIERS, FRANCE, FR 96635

Title: CEO () Delete
Name: HUMANN, CHARLES CEO
Address: 27/41 BLVD LOUISE MICHEL
City-St-Zip: GENNEVILLIERS, FRANCE, FR 96635

Title: EVP () Delete
Name: GRIGNON, CHRISTOPHE EVP
Address: 2011 NW 89 PLACE
City-St-Zip: DORAL, FL 33172 FL

Title: VP (X) Delete
Name: GAZZARATA, ANTONELLO VP
Address: VIA G. DELEDDA 3
City-St-Zip: STARANZANO, GO 34079 IT

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO (X) Change () Addition
Name: GAZZARATA, ANTONELLO CEO
Address: VIA G. DELEDDA 3
City-St-Zip: STARANZANO, GO 34079 IT

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CHRISTOPHE GRIGNON

EVP

07/22/2008

Electronic Signature of Signing Officer or Director

Date