

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029027

FILED
Apr 28, 2005
Secretary of State

Entity Name: MASTER YACHT BROKERS, LLC

Current Principal Place of Business:

101 N RIVERSIDE DR.
SUITE 119 W
POMPANO BEACH, FL 33062

New Principal Place of Business:

2608 N OCEAN BLVD
SUITE 2
POMPANO BEACH, FL 33062

Current Mailing Address:

101 N RIVERSIDE DR.
SUITE 119 W
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 02-0651281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLELLAN, TIMOTHY M
2637 E ATLANTIC BLVD #128
POMPANO BEACH, FL 33062 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: MCCLELLAN, TIMOTHY M
Address: 2637 E ATLANTIC BLVD #128
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM () Delete
Name: RABENSTINE, JAMES R
Address: 2730 NE 23RD ST.
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCCLELLAN, TIMOTHY M
Address: 2637 E ATLANTIC BLVD #128
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGR (X) Change () Addition
Name: RABENSTINE, JAMES R
Address: 2730 NE 23RD ST.
City-St-Zip: POMPANO BEACH, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TIM MCCLELLAN

MGRM

04/28/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date