2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000090404

Entity Name: STRIKER YACHTS, LLC

FILED Sep 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10750 NW 66 ST SUITE 304

DORAL, FL 33178 US

Current Mailing Address: New Mailing Address:

10750 NW 66 ST SUITE 304

DORAL, FL 33178 US

FEI Number: 41-2181189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASARES, BLAS R MGRM 10750 NW 66 ST SUITE 304 DORAL, FL 33178 US

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/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CASARES, BLAS R MR
 Name:

 Address:
 10750 NW 66 ST, SUITE 304
 Address:

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CIFUENTES, ANA G MRS
 Name:

 Address:
 10750 NW 66 ST, SUITE 304
 Address:

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 ABRAHAM, WITBOOI F PHD
 Name:

 Address:
 10750 NW 66 ST, SUITE 304
 Address:

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 BARNOLA, ALEJANDRO ESQ.
 Name:

 Address:
 EDF. ROYAL PALACE, MEZANINA, CHACAITO
 Address:

 City-St-Zip:
 CARACAS, VENEZUELA, VL 1050 VL
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 BARNOLA, MARIANA MISS
 Name:

 Address:
 CALLE PELAYO #30, 3° IZQ
 Address:

 City-St-Zip:
 MADRID, SPAIN, SP 28004 SP
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 ZAMORA, ANTONIO R ESQ.
 Name:

 Address:
 201 SOUTH BISCAYNE BLVD.
 Address:

 City-St-Zip:
 MIAMI, FL 33131 US
 City-St-Zip:

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: ANA G. CIFUENTES MGRM 09/01/2005