2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRES

FILED Feb 21, 2008 08:00 A **DOCUMENT # L05000079077** Secretary of State 1. Entity Name PARADISE BOAT RENTALS LLC Mailing Address Principal Place of Business 5950 PENÍÑSULAR AVE **5950 PENINSULAR AVE** KEY WEST, FL 33040 KEY WEST, FL 33040 02112008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3303274 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAMIREZ, CAMILO DO NOT WRITE 5950 PENINSULAR AVE KEY WEST, FL 33040 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 if applicable. (NOTE: Registered Agent signature required when reinstating) DATE U00000834427 02/28/08-80052-024 138.75 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME RAMIREZ, CAMILO STREET ADDRESS 5950 PENINSULAR AVE KEY WEST, FL 33040 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZiP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.