

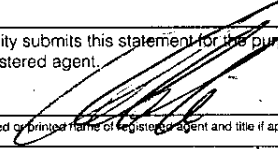
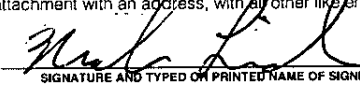


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 02, 2004 8:00 am**  
**Secretary of State**

02-02-2004 90013 022 \*\*\*150.00

<b>DOCUMENT # L84521</b> 1. Entity Name <b>DLD BOAT, INC.</b>																																																					
Principal Place of Business <b>% DAVID L. D'ONOFRIO</b> <b>2506 BARCELONA DR</b> <b>FT LAUDERDALE, FL 33301</b>				Mailing Address <b>% DAVID L. D'ONOFRIO</b> <b>2506 BARCELONA DR</b> <b>FT LAUDERDALE, FL 33301</b>																																																	
2. Principal Place of Business <b>3901 W. Sample Road</b> Suite, Apt. #, etc.		3. Mailing Address <b>c/o VAL L. OSIUSKI, ESQ.</b> Suite, Apt. #, etc.																																																			
City & State <b>Lauderhill, Florida</b>		City & State <b>Coral Springs, Fla. 401</b>		4. FEI Number <b>65-0205084</b>																																																	
Zip <b>33311</b>		Country - <b>USA</b> <b>BROWARD</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																																	
6. Name and Address of Current Registered Agent <b>D'ONOFRIO, DAVID L.</b> <b>2506 BARCELONA DR</b> <b>FT LAUDERDALE, FL 33301</b>		7. Name and Address of New Registered Agent Name <b>VAL L. OSIUSKI, ESQ.</b> Street Address (P.O. Box Number is Not Acceptable) <b>9600 W. Sample Road, Ste. 401</b> City <b>Coral Springs</b> <b>FL</b> Zip Code <b>33065</b>																																																			
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:  <b>VAL L. OSIUSKI, ESQ.</b> DATE: <b>1/29/04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																																		
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> <b>D</b>  <b>D'ONOFRIO, DAVID L.</b>  <b>2506 BARCELONA DR</b>  <b>FT LAUDERDALE, FL</b> </td> <td style="text-align: right;">Delete <input checked="" type="checkbox"/></td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>D'ONOFRIO, DAVID L.</b> <b>2506 BARCELONA DR</b> <b>FT LAUDERDALE, FL</b>	Delete <input checked="" type="checkbox"/>																						11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> <b>D, P</b>  <b>MARK LINDAU</b>  <b>3901 W. Sunrise Blvd</b>  <b>Lauderhill, Florida 33311</b> </td> <td style="text-align: right;">Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/></td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D, P</b> <b>MARK LINDAU</b> <b>3901 W. Sunrise Blvd</b> <b>Lauderhill, Florida 33311</b>	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>																					
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12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																					
SIGNATURE:  <b>MARK LINDAU</b> DATE: <b>1/29/04</b> DAYTIME PHONE: <b>954-582-0880</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																					