2007 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

Feb 09, 2007 08:00 AM **DOCUMENT # M46632 Secretary of State** 1. Entity Name ISLAND MARINE REPAIR, INC. Principal Place of Business Mailing Address **106 MARINA AVE 106 MARINA AVE** KEY LARGO, FL 33037 KEY LARGO, FL 33037 No Chg-P CR2E034 (11/05) 02062007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2815422 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent INGOLD, GLENN DO NOT WRITE 106 MARINA AVE KEY LARGO, FL 33037 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. П Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS πпе INGOLD, GLENN NAME STREET ADORESS 106 MARINA AVE CITY-ST-ZIP KEY LARGO, FL U00000629304 02/16/07-80052-001 158.75 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADORESS CITY-ST-ZIP NAME. STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. 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 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.

FILED