

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005701

**FILED**  
**Feb 27, 2008**  
**Secretary of State**

**Entity Name:** VESSELS OF HONOR, INC.

**Current Principal Place of Business:**

9950 HIBISCUS STREET  
MIAMI, FL 33157

**New Principal Place of Business:**

9780 E INDIGO ST  
SUITE 301-303  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

PO BOX 570787  
MIAMI, FL 33257

**New Mailing Address:**

9780 E INDIGO ST  
SUITE 301-303  
PALMETTO BAY, FL 33157

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

DEL ROSARIO, JACQUELINE  
9950 HIBISCUS STREET  
MIAMI, FL 33157 US

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

DEL ROSARIO, JACQUELINE  
9780 E INDIGO ST  
SUITE 301-303  
PALMETTO BAY, FL 33157 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: JACQUELINE, DELROSARIO

02/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DEL ROSARIO, JACQUELINE  
Address: 10800 SW 135TH TERRACE  
City-St-Zip: MIAMI, FL 33174

Title: CH ( ) Delete  
Name: BUKER, DIANE  
Address: 7790 SW 127 STREET  
City-St-Zip: MIAMI, FL 33156

Title: OF ( ) Delete  
Name: ELLIS, GEORGE  
Address: 230 NE 82 STREET  
City-St-Zip: MIAMI, FL 33138

Title: OF ( ) Delete  
Name: GORDON, BEVERLY  
Address: 12205 SW 16 TERRACE  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUELINE, DELROSARIO

PD

02/27/2008

Electronic Signature of Signing Officer or Director

Date