## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 25, 2005 08:00 AM Secretary of State DOCUMENT # P00000006914 DRY DOCK INVESTMENTS, INC. Principal Place of Business Mailing Address 639 EAST OCEAN AVENUE **639 EAST OCEAN AVENUE** SUITE 408 SUITE 408 BOYNTON BEACH, FL 33435 BOYNTON BEACH, FL 33435 No Chg-P 02182005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0996858 Not Applicable \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WOOLEY, THOMAS J ESQ. 639 EAST OCEAN AVENUE DO NOT WRITE SUITE 408 IN THIS SPACE BOYNTON BEACH, FL 33435 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, typed or pointed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D TITLE WOOLLEY, THOMAS J JR. NAME 639 EAST OCEAN AVENUE SUITE 408 STREET ADDRESS BOYNTON BEACH, FL 33435 CITY-ST-ZIP 42/25/05-80036-512 150.mm TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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

12. Thereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZIP

NONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**