

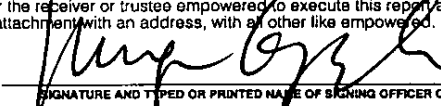


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90143 019 ***150.00

DOCUMENT # P00000030854 1. Entity Name EPPLE YACHT COMPANY					
Principal Place of Business 100 PIERCE STREET SUITE 708 CLEARWATER, FL 33755			Mailing Address 100 PIERCE STREET SUITE 708 CLEARWATER, FL 33755		
2. Principal Place of Business 1311 MISSOURI AVE SO.		3. Mailing Address 1311 MISSOURI AVE SO.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04252005 Chg-P CR2E034 (10/03)	
City & State CLEARWATER, FL.		City & State CLEARWATER, FL.		4. FEI Number 59-3634010	
Zip 33756		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent EPPLE, JURGEN 100 PIERCE STREET SUITE 708 CLEARWATER, FL 33755			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1311 MISSOURI AVE SO. City CLEARWATER FL Zip Code 33756		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EPPLE, JURGEN <input type="checkbox"/> Delete 100 PIERCE STREET CLEARWATER, FL 33755		TITLE NAME STREET ADDRESS CITY-ST-ZIP	1311 MISSOURI AVE SO. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CLEARWATER, FL 33756	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:  JURGEN EPPLE 4/24/05					