

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035535

**FILED**  
**Mar 25, 2005**  
**Secretary of State**

**Entity Name:** NAUTICAL DESIGNS BY MARY ANN, INC.

**Current Principal Place of Business:**

PO BOX 290395  
DAVIE, FL 33329

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 290395  
DAVIE, FL 33329

**New Mailing Address:**

**FEI Number:** 65-1009118      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JAFFEE, MICHAEL CPA  
1601 NORTH PALM AVENUE SUITE 309C  
PEMBORKE PINES, FL 33026 US

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

JAFFEE, MICHAEL CPA  
9720 STIRLING ROAD  
212  
COOPER CITY, FL 33024 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: MICHAEL S JAFFEE      03/25/2005  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: FARKAS, MARY ANN  
Address: PO BOX 290395  
City-St-Zip: FT LAUDERDALE, FL 33329

Title: D      ( ) Delete  
Name: FARKAS, ROBERT J  
Address: PO BOX 290395  
City-St-Zip: FT LAUDERDALE, FL 33329

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

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 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY ANN FARKAS      P      03/25/2005  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date