


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 10, 2005 8:00 am**  
**Secretary of State**

02-10-2005 90057 033 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                      |                                                                                                                                                                        |                                                                                                                           |
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| DOCUMENT # P0000035729                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                      |                                                                                       |                                                                                                                           |
| 1. Entity Name<br>MTHOT YACHT MANAGEMENT, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                      |                                                                                                                                                                        |                                                                                                                           |
| Principal Place of Business<br>404 SE 17TH STREET<br>FT. LAUDERDALE, FL 33316                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                      | Mailing Address<br>404 SE 17TH STREET<br>FT. LAUDERDALE, FL 33316                                                                                                      |                                                                                                                           |
| 2. Principal Place of Business<br>10750 SW 14th Ct<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                      | 3. Mailing Address<br>10750 SW 14th Ct<br>Suite, Apt. #, etc.                                                                                                          |                                                                                                                           |
| City & State<br>Davie, FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                      | City & State<br>Davie, FL                                                                                                                                              |                                                                                                                           |
| Zip<br>33324                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                      | Country<br>Broward                                                                                                                                                     |                                                                                                                           |
| Zip<br>33324                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                      | Country<br>Broward                                                                                                                                                     |                                                                                                                           |
| 4. FEI Number<br>65-0994985                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                      | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                 |                                                                                                                           |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                      | \$8.75 Additional Fee Required                                                                                                                                         |                                                                                                                           |
| 6. Name and Address of Current Registered Agent<br>CONNER, MIKE<br>404 SE 17TH STREET<br>FT. LAUDERDALE, FL 33316                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                      | 7. Name and Address of New Registered Agent<br>Name: Same<br>Street Address (P.O. Box Number is Not Acceptable):<br>10750 SW 14th Ct<br>City: Davie FL Zip Code: 33324 |                                                                                                                           |
| 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.<br>SIGNATURE: <u>Mike Conner</u> <u>Mike Conner</u> DATE: <u>2/5/05</u><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>                                                                                                                                                                             |                                                                                                      |                                                                                                                                                                        |                                                                                                                           |
| <b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                      | 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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>CONNER, MIKE<br>404 SE 17TH STREET<br>FT. LAUDERDALE, FL 33316 <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                         | Same<br>10750 SW 14th Ct<br>Davie, FL 33324 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | D<br>CONNER, TERRY<br>404 SE 17TH STREET<br>FT. LAUDERDALE, FL 33316 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                         | Same<br>10750 SW 14th Ct.<br>Davie, FL 33324 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>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: <u>Mike Conner</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                      | SIGNATURE: <u>Mike Conner</u> DATE: <u>2/5/05</u> DAYTIME PHONE #: <u>954-614-7352</u>                                                                                 |                                                                                                                           |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                      | <small>Date Daytime Phone #</small>                                                                                                                                    |                                                                                                                           |