2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2004 8:00 am
Secretary of State
09-08-2004 90120 028 ***150.00

DOCUMENT #P00000043195

1. Entity Name
CAPT. BRETOI'S PILOTING AND MAINTENANCE, INC.

Principal Place of Business	Mailing Address
3051 N TAMIAMI TR., #A-2 SARASOTA, FL 34243 US	3051 N TAMIAMI TR., #A-2 SARASOTA, FL 34243 US

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2. Principal Place of Business		3. Mailing Address	
8051 N. TAMIAMI TR.		8051 N. TAMIAMI TR.	
Suite, Apt. #, etc.: SUITE A-2		Suite, Apt. #, etc.: P.O. BOX 56	
City & State: SARASOTA FL.		City & State: SARASOTA FL.	
Zip: 34243	Country: U.S.A.	Zip: 34243	Country: U.S.A.

4. FEI Number 65-1008302

5. Certificate of Status Desired ☐ $8.75 / Fee Requ

6. Name and Address of Current Registered Agent

BRETOI, JEFF
4055 VALLE LANE
SARASOTA, FL 34235

7. Name and Address of New Registered Agent

Name: BRETOI JEFF
Street Address (P.O. Box Number is Not Acceptable): 4055 VALLE LANE
City: SARASOTA FL Zip Code: 34235

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 wi the obligations of registered agent.

SIGNATURE: JEFFREY S. BRETOI (OWNER) [signature] 8/30/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE is $150.00
Due by September 5, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(... corporation did not receive the pri...

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRENTOI, JEFF 4055 VALLE LANE SARASOTA, FL 34235	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRETOI, JEFF. 4055 VALLE LANE SARASOTA FL. 34235	☒ Change
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change

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 th 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 offic 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 1 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] JEFFREY S. BRETOI (OWNER) 8/30/04 (941)321-0069
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone