## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2005 08:00 AM Secretary of State

1. Entity Name	FISHIN', INC.					J	
Principal Place of Business 17 RICHMOND DR. NEW SMYRNA BEACH, FL 32169  Mailing Address 17 RICHMOND DR. NEW SMYRNA BEACH, FL 32169  Mew SMYRNA BEACH, FL 32169			-				8888 (NOVERN IN 1888)
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent				04192005  4. FEI Number 59-366	No Chg-P	CR2E034 (10	• -
NEVIASER, J.S. 17 RICHMOND DR. NEW SMYRNA BEACH, FL 32169			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the ions of registered agent.  Signature, typed or printed name of registered agent and fills		ed office or registe d Agent signature require		th, in the State of Floric	ia. I am familiai	with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.				5.00 May Be ided to Fees	U000003 04/30/05-8	46519 0079-013	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEVIASER, J.S. 17 RICHMOND DR. NEW SMYRNA BEACH, FL 32169	23. * *	-	<del></del>	<del>-</del>		
TITLE NAME SYREET ADDRESS CITY-ST-ZIP		~ · · · · · · · · · · · · · · · · · · ·		<u> </u>	<u></u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· ·			NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SP/	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				* <del></del>		•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							- # -
12. I hereby of indicated of the corchanged.	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowers or on an attachment with an address, with a	filing does not qualify for the exe and accurate and that my signa ed to execute this report as requ all other like empowered.	emption stated in Stated in Stature shall have the ired by Chapter 60	Section 119.07(3) e same legal eife 07, Florida Statuti	(ī), Florida Statutes. I fu of as if made under oal es, and that my name a	urther certify that th; that I am an appears in Block	

AND TYPED ON PHINTED NAME OF SIGNING OFFICER OR DIRECTOR