2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005
Secretary of State

DOCUMENT# P00000082334

Entity Name: M/V CHALLENGER SHRIMP CO., INC.

Current Principal Place of Business:

PO BOX 6189
FORT MYERS BEACH, FL 33932

New Principal Place of Business:

1300 MAIN STREET
FORT MYERS BEACH, FL 33931

Current Mailing Address:

PO BOX 6189
FORT MYERS BEACH, FL 33932

New Mailing Address:

FEI Number: 65-1041272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENDERSON, DENNIS
21251 CARTER ROAD
ESTERO, FL 33920 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GALA, GEORGE
Address: 7227 HENDRY CREEK DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: VPD ( ) Delete
Name: HENDERSON, DENNIS
Address: 21251 CARTER ROAD
City-St-Zip: ESTERO, FL 33920

Title: TD ( ) Delete
Name: BACKMAN, RAYMOND
Address: 815 BUTTONWOOD DRIVE
City-St-Zip: FT MYERS BEACH, FL 33931

Title: SD ( ) Delete
Name: GALA, CHRISTINE
Address: 7227 HENDRY CREEK DRIVE
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CHRISTINE GALA SD 03/31/2005

Electronic Signature of Signing Officer or Director — Date