


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000084623</b> 1. Entity Name THE FISH COLLECTOR, INC.	
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Principal Place of Business 6981 SOUTH ALOYSIA AVE FLORAL CITY, FL 34436	Mailing Address 6981 SOUTH ALOYSIA AVE FLORAL CITY, FL 34436
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04152008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3681057	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BECKNER, JR, ROGER E PRES 6980 SOUTH ALOYSIA AVE FLORAL CITY, FL 34436
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**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BECKNER, ROGER E JR 6981 SOUTH ALOYSIA AVE FLORAL CITY, FL 34436
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BECKNER, ROGER E III 6980 SOUTH ALOYSIA AVE FLORAL CITY, FL 34436
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BECKNER, JENNIFER 6980 SOUTH ALOYSIA AVE FLORAL CITY, FL 34436
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U000000917740  
05/13/08-80054-009 150.00

**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  4/22/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #