

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 21, 2006 8:00 am
Secretary of State

06-21-2006 90002 037 ***150.00

DOCUMENT # P00000113751 1. Entity Name PRISTINE MARINE INC.			
Principal Place of Business 1436 SW 109 WAY DAVIE FL 33324		Mailing Address 1436 SW 109 WAY DAVIE FL 33324	
2. Principal Place of Business 2137 Lake Lotela Dr Suite, Apt. #, etc.		3. Mailing Address 2137 LAKE LOTELA DR Suite, Apt. #, etc.	
City & State AVON PARK FL		City & State AVON PARK FL	
Zip 33825	Country USA	Zip 33825	Country USA
4. FEI Number 65-1068284		Applied For <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 AKERS, BRYAN 1436 SW 109 WAY DAVIE FL 33324		7. Name and Address of New Registered Agent Name AKERS, BRYAN Street Address (P.O. Box Number is Not Acceptable) 2137 LAKE LOTELA DR City AVON PARK FL Zip Code 33825	
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 <u><i>Bryan S. Akers</i></u> BRYAN S. AKERS <u>6-19-06</u> <small>Signature, name or printed name of registered agent and fee, if applicable. (NOTE: Registered agent signature required when renouncing.)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		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 P <input type="checkbox"/> Delete NAME AKERS, BRYAN STREET ADDRESS 1436 SW 109 WAY CITY-ST-ZIP DAVIE FL 33324	TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME AKERS, BRYAN STREET ADDRESS 2137 LAKE LOTELA DR. CITY-ST-ZIP AVON PARK, FL 33825	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME AKERS, CORINE STREET ADDRESS 2137 LAKE LOTELA DR CITY-ST-ZIP AVON PARK FL 33825
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u><i>Bryan S. Akers</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			