

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2004 8:00 am
Secretary of State

05-07-2004 90134 041 ***150.00

DOCUMENT # P00000116093
1. Entity Name
Conch Republic Flamingo Fleet, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1117 Whitehead Street Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State Key West, FL	City & State
Zip 33040	Country USA

54053460

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0460569	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent
	Name Arthur William Bohmfalk
	Street Address (P.O. Box Number is Not Acceptable) 1117 Whitehead Street
	City Key West
	FL
	Zip Code 33040

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

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/Director Arthur William Bohmfalk 1117 Whitehead Street Key West FL 33040	TITLE 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 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE



Arthur William Bohmfalk

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/2004

Date

(305) 294-2005

Daytime Phone #