
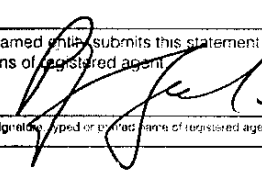
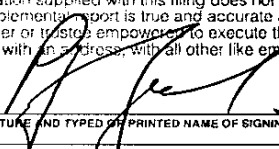


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90056 028 ***150.00

DOCUMENT # P01000107477 1. Entity Name SHIP SHOP MARINE CARPENTRY, INC.																													
Principal Place of Business 5148 WATERSIDE WAY FT. PIERCE, FL 34981 Y			Mailing Address 5148 WATERSIDE WAY FT. PIERCE, FL 34981 Y																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State Zip Country			City & State Zip Country																										
4. FEI Number 04-3602836				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 VANZYL, PHILLIP 5148 WATERSIDE WAY FT. PIERCE, FL 34981			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																										
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  PHILLIP VANZYL 03-14-05 <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:50%;">PD</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>VANZYL, PHILLIP</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5148 WATERSIDE WAY</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FT. PIERCE, FL 34981</td> <td></td> </tr> </table>			TITLE	PD	<input type="checkbox"/> Delete	NAME	VANZYL, PHILLIP		STREET ADDRESS	5148 WATERSIDE WAY		CITY-ST-ZIP	FT. PIERCE, FL 34981		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:50%;"></td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: 				03-14-05 772 215 9925 <small>Daytime Phone #</small>																									