FILED Apr 02, 2007 8:00 am 2007 FOR PROFIT CORPORATION ANNUAL REPORT

Markey Actions April 1962 CORAL CABLES, FL 33134 CORAL CABLES,	DOCUMENT # P01000111222 1. Entity Name TERALEX YACHT, INC.				Secretary of S 04-02-2007 90066 005 ***1				
Sulfic. Appl. 4, etc. City & State City &	201 ALHAMBRA CIRCLE SUITE 502 201 ALHAMBRA CIRCLE						٠.		
City & State Ci	2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address						
2/p Country 2/p Country 5/p Country 5. Certificate of Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired \$8.75 Additional ** Per Regulator 4. Proceedings of the Shifts Desired 5. Proceedings of the Shifts D	Suite, Apt.	#, etc.	State, Apt. #, etc.			03222007	Chg-P	CR2E034 (12/06))
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Name	Zip	Country Zip Cour		Country		5. Certificate	e of Status Desired		
Street Andress (P.O. Box Number is No. Acceptable) Street Andress (P.O. Box Number is No. Acceptable)	6. Name and Address of Current Registered Agent				ne , , ,	7. Name and	d Address of New	Registered Agent	
8. The above naming entity submits this statement for the perifose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obtologicate submits of poliment agent scales if appearing a property of the obtologicate submits of poliment agent scales if appearing as registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obtologicate submits of poliment agent scales if appearing financing and appearing acceptance of the company of the state of Florida. I am familiar with, and accept the obtologicate and poliment agent scales if appearing financing and accept the obtologicate or poliment agent scales if appearing financing and accept the obtologicate or poliment agent scales if appearing financing and accept the obtologicate or poliment agent scales if appearing financing and accept the obtologicate or poliment agent scales in a scale and accept the obtologicate or poliment agent scales in a scale and accept the obtologicate or poliment agent scales in a scale and accept the obtologicate or poliment agent scales in a scale and accept the obtologicate or poliment agent scales in a scale and accept the obtological acceptance agent	201 ALHAMBRA CIRCLE SUITE 502				et Address (P.O. Box Numb	per is Not Acceptab	1 tuc	
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After Way 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE QD	SIGNATURÉ_	Signature, typed by printing inspire of legistered agen	at and title if applicable. (NOT	FE: Registered Agent s	agnature required	(when reinstating)		DATE	
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