## 2004 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Aug 09, 2004 08:00 AM Secretary of State **DOCUMENT # P01000118059** MIAMI BEACH SPORT FISHING, INC. Principal Place of Business Mailing Address 1000 VENETIAN WAY UNIT 111 1000 VENETIAN WAY UNIT 111 MIAMI, FL 33139 MIAMI, FL 33139 07182004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. EEI Number Applied For 80-0006244 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCDOWELL, CAMERON 1000 VENETIAN WAY UNIT 111 CO NOT WRITE MIAMI, FL 33139 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. Signature, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaing) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. BILE MCDOWELL, CAMERON NAME 1000 VENETIAN WAY UNIT 111 STREET ADDRESS U00000169689 08/03/04-80007-804 150.00 CITY-ST-7/P MIAMI, FL 33139 TODE NAME STREET ADDRESS CITY-57-27P NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP BILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-DP DDE MAKE STREET ADDRESS CITY-ST-289 TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 139.07(3)(f). Florida Statutes, I turther 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 terror 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. 3652345-6003

SIGNATURE THO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAME STREET ADDRESS CITY-ST-7P

SIGNATURE:

Daytime Phone #