

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000120726

FILED
Apr 28, 2004
Secretary of State

Entity Name: J & J BOAT & JET SKI RENTAL, INC.

Current Principal Place of Business:

482 BLACKBURN PT RD
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

6348 STURBRIDGE COURT
SARASOTA, FL 34238

New Mailing Address:

FEI Number: 30-0006116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOIGT, STEPHEN F ESQ
C/O VOIGT & VOIGT, P.A.
2042 BEE RIDGE ROAD
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOS () Delete
Name: PETERS, JAMES A
Address: 92 BERNICE DRIVE
City-St-Zip: CHEEKTOWAGA, NY 14225

Title: P () Delete
Name: PETERS, JASON J
Address: 6348 STURBRIDGE CT
City-St-Zip: SARASOTA, FL 34238

Title: V () Delete
Name: PETERS, JOSEPH A
Address: 92 BERNICE DR
City-St-Zip: CHEEKTOWAGA, NY 14225

Title: T () Delete
Name: PETERS, KATHLEEN
Address: 92 BERNICE DR
City-St-Zip: CHEEKTOWAGA, NY 14225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES (X) Change () Addition
Name: PETERS, JASON J
Address: 6348 STURBRIDGE CT
City-St-Zip: SARASOTA, FL 34238

Title: VP (X) Change () Addition
Name: PETERS, JOSEPH A
Address: 92 BERNICE DR
City-St-Zip: CHEEKTOWAGA, NY 14225

Title: TRE (X) Change () Addition
Name: PETERS, KATHLEEN
Address: 92 BERNICE DR
City-St-Zip: CHEEKTOWAGA, NY 14225

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN H. PETERS

TRE

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date