

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 10, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90033 030 \*\*\*158.75

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                            |                                                                                                                                                                                                                                             |                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # P02000019443</b><br>1. Entity Name<br>SOUTH FLORIDA SPORT FISHING, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                            |                                                                                                                                                                                                                                             |                                                                   |
| Principal Place of Business<br>1001 E SAMPLE RD<br>10E<br>POMPANO, FL 33064                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                            | Mailing Address<br>1001 E SAMPLE RD<br>10E<br>POMPANO, FL 33064                                                                                                                                                                             |                                                                   |
| 2. Principal Place of Business<br>750 E. SAMPLE RD.<br>Suite, Apt. #, etc.<br>BLDG. 10, STE. 5<br>City & State<br>POMPANO BCH, FL.<br>Zip<br>33064<br>Country<br>BROWARD                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                            | 3. Mailing Address<br>P.O. BOX 5089<br>Suite, Apt. #, etc.<br>City & State<br>LIGHTHOUSE POINT, FL<br>Zip<br>33074<br>Country<br>BROWARD                                                                                                    |                                                                   |
| 4. FEI Number<br>33-0994523                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                            | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                                                      |                                                                   |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                            | 01122006 Chg-P CR2E034 (11/05)                                                                                                                                                                                                              |                                                                   |
| 6. Name and Address of Current Registered Agent<br>GENOUNE, LA<br>1001 E. SAMPLE RD<br>STE. 10E<br>LIGHTHOUSE PT, FL 33064                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                            | 7. Name and Address of New Registered Agent<br>Name <u>L.A. GENOUNE</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>750 E. SAMPLE RD.</u><br><u>BUILDING 10, STE. 5</u><br>City <u>POMPANO BEACH</u> <u>FL</u> <u>33064</u> |                                                                   |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                            |                                                                                                                                                                                                                                             |                                                                   |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                            | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                |                                                                   |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                            | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                                                                                                |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | P<br>GENOUNE, LA<br>1001 E. SAMPLE RD., STE 10E<br>POMPANO BEACH, FL 33064 | <input type="checkbox"/> Delete                                                                                                                                                                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 750 E. SAMPLE RD<br>POMPANO BCH, FL 33064                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 the empowered. |                                                                            |                                                                                                                                                                                                                                             |                                                                   |
| SIGNATURE: <u>[Signature]</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF ISSUING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                            | Date <u>1/13/06</u> <u>9549427261</u><br><small>Daytime Phone #</small>                                                                                                                                                                     |                                                                   |