

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91788 026 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000077795					
1. Entity Name MAYFLOWER YACHT DETAILING, INC.					
Principal Place of Business 4001 SOUTH OCEAN DR., #4-F HOLLYWOOD, FL 33019			Mailing Address 4001 SOUTH OCEAN DR., #4-F HOLLYWOOD, FL 33019		
2. Principal Place of Business <i>1835 E. Hallandale Beach Blvd. Hallandale Beach, FL 33009.</i>			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 03-0474338				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALVAREZ, SANTOS 4001 SOUTH OCEAN DR., #4-F HOLLYWOOD, FL 33019			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 _____ DATE _____ (Signature, typed or printed name of registered agent and title is required. (NOTE: Registered Agent's signature required when withdrawing))					
FILE NOW! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALVAREZ, SANTOS 4001 SOUTH OCEAN DR., #4-F HOLLYWOOD, FL 33019 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACAGNO, JUAN J 3801 S. OCEAN DR., #6-J HOLLYWOOD, FL 33019 ☒ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUCCI, JULIAN N 3801 S. OCEAN DR., #6-J HOLLYWOOD, FL 33019 ☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALVAREZ, SANTOS 1835 E. Hallandale Beach Blvd. Hallandale Beach, FL 33009. ☒ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUCCI, JULIAN N 1835 E. Hallandale Beach Blvd. Hallandale Beach, FL 33009. ☒ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
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 (I changed, or on an attachment with an address, with all other like empowered).					
SIGNATURE: _____ DATE: 4/29/03 754-244-1975 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2034 (10/02)