

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90326 044 ***150.00

50037707



04132005 Chg-P CR2E034 (10/03)

4. FEI Number **33-1019808** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

D'ESPIES, KEVIN J
888 E LAS OLAS BLVD SUITE 720
FORT LAUDERDALE, FL 33301

7. Name and Address of New Registered Agent

Name
Michael DiCondina
1887 West State Road 84
Ft Lauderdale, FL 33315

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 Michael DiCondina (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **NOBMAN, LEE**
STREET ADDRESS **719 SOUTHPOINT BLVD SUITE C**
CITY-ST-ZIP **PETALUMA, CA 94954**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael DiCondina MICHAEL DI CONDINA 4/13/05 954463055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

~~#P02000086301~~
~~50037707~~

MONTE FINO
CUSTOM YACHTS, INC.



HARGRAVE
CUSTOM YACHTS

COLONIAL
YACHT SALES

COLONIAL YACHT SALES, INC

1887 West State Road 84, Ft. Lauderdale, FL 33315

Tel: (954) 463-0555 - Fax: (954) 463-8621

Date: April 13, 2005

To: Florida Department of State, Division of Corporations

From: Michael F. Joyce, President Colonial Yacht Sales, Inc

Reference: ADVANTAGE YACHT SERVICES, INC,
Charter# P02000086301

Subject: Empowerment to sign Florida UBR

This is to certify that I, Michael F. Joyce am empowered to sign the Florida UBR for
ADVANTAGE YACHT SERVICES, INC as agent.

A handwritten signature in black ink, appearing to read "Michael F. Joyce". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Michael F. Joyce
1887 West State Road 84
Ft. Lauderdale, FL 33315