

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000124400

1. Entity Name
KDB YACHT CHARTERS, INC.



Principal Place of Business

1317 CITRUS ISLE
FT. LAUDERDALE, FL 33315

Mailing Address

1317 CITRUS ISLE
FT. LAUDERDALE, FL 33315

DO NOT WRITE IN THIS SPACE

**FILED
Mar 16, 2006 08:00 AM
Secretary of State**



03132006 No Chg-P CR2E034 (11/05)

4. FEI Number 57-1138933	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BEAUDET, KATHLEEN
1317 CITRUS ISLE
FT. LAUDERDALE, FL 33315

**DO NOT WRITE
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 printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when renewing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

UD00000470560
03/28/06-80018-024 150.00

10.

OFFICERS AND DIRECTORS

TITLE	PD
NAME	BEAUDET, KATHLEEN
STREET ADDRESS	1317 CITRUS ISLE
CITY-ST-ZIP	FT. LAUDERDALE, FL 33315

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 like empowerments.

SIGNATURE: *Kathleen Beaudet* *Kathleen Beaudet*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/06 954 765 1274

Date

Daytime Phone #