



**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 01, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000034104 1. Entity Name FLYEFISH, INC.	
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Principal Place of Business 5911 S.W. 195TH TERR. FT. LAUDERDALE, FL 33332	Mailing Address 5911 S.W. 195TH TERR. FT. LAUDERDALE, FL 33332
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DO NOT WRITE IN THIS SPACE


06282005 No Chg-P CR2E034 (10/03)
4. FEI Number
02-0685889
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
Applied For
Not Applicable

6. Name and Address of Current Registered Agent
FILINGS, INC.
3732 N.W. 16TH ST.
FT. LAUDERDALE, FL 33311

**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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD BROWN, CHRISTIAN C 5911 S.W. 195TH TERR. FT. LAUDERDALE, FL 33332
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD BROWN, SUSAN K 5911 S.W. 195TH TERR. FT. LAUDERDALE, FL 33332
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/01/05-80007-006 150.00
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IN THIS SPACE**

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: *Susan K Brown* SUSAN K BROWN Vice President 6/28/05 954 4348564
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #