

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90051 026 ***150.00

DOCUMENT # P03000038291 1. Entity Name INDIGO MARINE, INC.																																							
Principal Place of Business 110 NW 56TH STREET FORT LAUDERDALE, FL 33309		Mailing Address 110 NW 56TH STREET FORT LAUDERDALE, FL 33309																																					
2. Principal Place of Business 1717 W. LAS OLAS BLVD. Suite, Apt. #, etc.		3. Mailing Address 1717 W. LAS OLAS BLVD. Suite, Apt. #, etc.																																					
City & State FORT LAUDERDALE, FL Zip 33312		City & State FORT LAUDERDALE, FL Zip 33312																																					
Country FLORIDA		Country FLORIDA																																					
4. FEI Number 01-0778649		Applied For ☐ Not Applicable																																					
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																																					
6. Name and Address of Current Registered Agent VANSTONE, GAIL E 110 NW 56TH STREET FORT LAUDERDALE, FL 33309		7. Name and Address of New Registered Agent Name VANSTONE, GAIL E. Street Address (P.O. Box Number is Not Acceptable) 1717 W. LAS OLAS BLVD. City FORT LAUDERDALE FL Zip Code 33312																																					
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: <u>Gail E. Vanstone</u> 30 March 2005 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) 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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 80%;"> DP VANSTONE, GAIL E 110 NW 56TH STREET FORT LAUDERDALE, FL 33309 </td> <td style="width: 10%; text-align: right;"> ☐ Delete </td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> </table>		TITLE	DP VANSTONE, GAIL E 110 NW 56TH STREET FORT LAUDERDALE, FL 33309	☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 80%;"> 1717 W. LAS OLAS BLVD. FORT LAUDERDALE, FL 33312 </td> <td style="width: 10%; text-align: right;"> ☒ Change ☐ Addition </td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> </table>		TITLE	1717 W. LAS OLAS BLVD. FORT LAUDERDALE, FL 33312	☒ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition
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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: <u>Gail E. Vanstone</u> (Gail E. Vanstone) 30 March 2005 954-806-3884 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																							