2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 05, 2004 8:00 am Secretary of State **DOCUMENT # P03000055195** 04-05-2004 90074 014 ***150 00 LAUDERDALE YACHT SALES, INC. Principal Place of Business Mailing Address 94044237 701 BRICKELL AVE STE 3000 701 BRICKELL AVE STE 3000 MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address 3001 State Road 84. 3001 State Road 84 Suite, Apt. #, etc. Suite, Apt. #, etc. 02252004 CR2E034 (10/03) 4. FEI Number 90-0113368 City & State Ft. Lauderdale, FL. City & State Applied For Ft. Louderdale, FL. Not Applicable Country USA Country USA Zio \$8.75 Additional 5. Certificate of Status Desired 333/2 333/2 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MicHAEL MODE INTRASTATE REGISTERED AGENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVE STE 3000 MIAMI, FL 33131 355 ALHAWBRA CIRCLE pmits this state 8. The above named entit mept 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 8X SIGNATURE nd pile i applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$180.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change **Addition** Russell S. Preston, III NAME NAME 19677 120 Avenue South BOCA RATION, FL. 33498 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITE F Delete TITLE ☐ Change Addition Richard C. Holiber NAME NAME 21539 Halstead Drive STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA Raton, FL. 33428 RILE Change ☐ Delete TITLE XI Addition Alexander S. Preston NAME NAME 19677 120 Avenue south STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA Raton FL. 33498 Change 77TLF ☐ Detete TITLE **⊠** Addition Russells. Preston. IV NAME NAME STREET ADDRESS STREET ADDRESS 19677 120 Avenue South CITY-ST-7IP CITY-ST-ZIP BOCA Rater FL. 33498 TITLE Delete DTLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 parapriless and all other like empowered. Russell S. Preston III 4/2/04 SIGNATURE

FILED