2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081037

50 WATERWAY DRIVE

COOMERA, QL 4209 AU

Address:

City-St-Zip:

FILED Apr 25, 2005 Secretary of State

Entity Name: RIVIERA YACHTS OF THE AMERICAS, INC.									
Current Principal Place of Business:					New Principal Place of Business:				
1940 BROA RIVIERA B									
Current Mailing Address:					New Mailing Address:				
1940 BROA RIVIERA B									
FEI Number:	20-0108862	FEI	Number Applied For()	FEI Num	nber Not Appl	icable ()	Certific	ate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:				
FRANKLIN, MICHAEL E 1940 BROADWAY AVE RIVIERA BEACH, FL 33404 US					MONAGAN, AMY L 1940 BROADWAY AVE RIVIERA BEACH, FL 33404 US				
The above in the State		ity submit	s this statement for the p	ourpose of	f changing i	s registered	office or	registered agent, or both,	
SIGNATURE: AMY MONAGAN					04/25/2005				
Electronic Signature of Registered Agent								Date	
Election Carr	ıpaign Finan	cing Trust	Fund Contribution ().						
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	DIR. FRANKLIN, 1940 BROA RIVIERA BE	DWAY AVE	≣ :		Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	DIR. KAUFMAN, 1719 PEMB WILMINGTO	ROKE JON	IES DRIVE		Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	DIR. MOXEY, WI 50 WATERN COOMERA,	NAY DRIVE	.		Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name:	DIR. CANDLER,	() Delete			Title: Name:	DIR. () SAYER. TIM	() Change	() Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

50 WATERWAY DRIVE

COOMERA, QL 4209 AU

SIGNATURE: AMY MONAGAN MGR 04/25/2005