2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147662

FILED May 01, 2009 Secretary of State

Entity Name: INTERNATIONAL BOAT & YACHT MANAGEMENT & MAINTENANCE INC.

Current Principal Place of Business: New Principal Place of Business:

2600 SW 3RD AVENUE

FORT LAUDERDALE, FL 33315 FORT LAUDERDALE, FL 33316 US US

Current Mailing Address: New Mailing Address:

757 SE 17 TH STREET 757 SE 17TH ST

FORT LAUDERDALE, FL 33316 # 960 US FT. LAUDERDALE, FL 33316 US

FEI Number: 80-0083965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EDELMAN, JAY L DE GROOT, MARK 9850 SUNŔISE LAKES BLVD 757 SE 17TH ST

FT. LAUDERDALE, FL 33316 US 209

SUNRISE, FL 33322 US

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.

SIGNATURE: MD 05/01/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P VP Title: () Delete Title: P VP (X) Change () Addition

DEGROOT, MARK DEGROOT, MARK Name: Name: 757 SE 17TH STREET # 960 757 SE 17TH ST Address: Address:

City-St-Zip: FORT LAUDERDALE,, FL 33316 US City-St-Zip: FORT LAUDERDALE,, FL 33316 US

Title: Title: () Change () Addition (X) Delete

EDELMAN, JAY L Name: Name: 9850 SUNRISE LAKES BLVD. # 209 Address: Address: City-St-Zip: SUNRISE, FL 33322 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: MD **PRES** 05/01/2009