

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010419

Entity Name: THE DRUNKEN PIRATE INC.

FILED
Apr 15, 2005
Secretary of State

Current Principal Place of Business:

516 MAIN STREET
DAYTONA BEACH, FL 32118 US

New Principal Place of Business:

Current Mailing Address:

47 COQUINA POINT DR.
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 32-0103959

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOB, EDWAR A
47 COQUINA POINT DR.
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

JACOB, EDWARD A
47 COQUINA POINT DR.
ORMOND BEACH, FL 32174 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: EDWARD A. JACOB

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JACOB, EDWAR A
Address: 47 COQUINA POINT DR
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VP () Delete
Name: OLIVER, MANUEL A
Address: 2920 N. SHELL RD.
City-St-Zip: DELAND, FL 32720 US

Title: S,T () Delete
Name: ARRAJ, HALIM A
Address: 10 LYNNHURST DR UNIT 116
City-St-Zip: ORMOND BEACH, FL 32176 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S,T (X) Change () Addition
Name: ARRAJ, HALIM A
Address: 1201 BOND ST.
City-St-Zip: EDGEWATER, FL 32132 US

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.

SIGNATURE: EDWARD A. JACOB

P

04/15/2005

Electronic Signature of Signing Officer or Director

Date