2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000017821 1. Erifly Name BARZ MARINE, INC.					FILED	
				05 SEP 15	05 SEP 15 AMII: 03	
Principal Place of Business 18675 SE FEDERAL HWY JUPITER, FL 33469		Mailing Address 18675 SE FEDERAL HWY JUPITER, FL 33469		SECRETAR FALLAHASS	SECRETARY 50066845 FALLAHASSEE, FLORIDA	
2. Principal Place of Business		3. Mailing Address				
Suite, Ap #, etc.		Suite, Apt. #, etc.			ERIEJ (1211 (ERRO 12110 1120) 140-1402 14 1284	
714116		City & State AM		08022005 Chg-P	CR2E034 (10/03) Applied For	
City & State		7 11.		0437841	Not Applicable	
Zip	Country U 7 PA	Zip	Country	5. Certificate of Status Desired	S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent Nam				7. Name and Address of New Registered Agent		
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.				Street Address (P.O. Box Number is Not Acceptable)		
4TH FLOOR MIAMI, FL 33145			<u> </u>			
1015 400, 1 2	. 56 3		City	-W	FL Zip Code	
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: typed or physical name of registered agent and utte if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!! FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.						
10.			11.	ADDITIONS/CHANGES TO OFFI		
NAME	BARDZINSKÍ, STEVEN A		TITLE NAME	BANDZINSK; STEVEN SR Addition		
STREET ADDRESS CITY+ST-ZIP	18675 SE FEDERAL HWY JUPITER, FL 33469		STREET ADDRESS City-St-Zip	18675 SE FEN HUS JUPITON FL 3746 VICE PAESIDENT	g	
TITLE	STD PARRYINGUE PORINE	Delete	TITLE NAME	VICE PAESIDENT	Change	
NAME STREET ADDRESS	BARDZINSKI, ROBIN E 18675 SE FEDERAL HWY	,	STREET ADDRESS	BANDZIUSKI STE 18675 SEFED HU JUDITON FL 3346	14-03 K	
CITY-ST-ZIP	JUPITER, FL 33469	☐ Delete	CITY-SI-ZIP TITLE		. Change Addition	
NAME STREET ADORESS			NAME Street Address	500059 09/20/050104	782885 5018 **150.00	
CITY-ST-ZIP			CHTY-ST-ZIP	03/ 23/ 03 010/		
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADORESS City-St-Zip			
TITLE		Detete	TITLE		Change Addition	
NAME STREET ADDRESS			NAME Street Address			
CITY-ST-ZIP		☐ 6-1-1-	CITY-ST-ZIP TITLE		☐ Change ☐ Addition	
NAME		☐ Delete	NAME	•	C) Guarde C1 Voquion	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS 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 an address, with all other like empowered.						
SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME DYSIGNING OFFICER OR DIRECTOR 9/5/05 56/743-5325 Date Date Date Description Phone #						
SIGNATURE. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Dale Daytime Phone #						