

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000021587

Entity Name: AFRICAT MARINE, INC.

FILED
Jun 17, 2009
Secretary of State**Current Principal Place of Business:**4855 HILLSBORO BLVD
B-11
COCONUT CREEK, FL 33073**New Principal Place of Business:****Current Mailing Address:**4855 HILLSBORO BLVD
B-11
COCONUT CREEK, FL 33073**New Mailing Address:**

FEI Number: 34-1977176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:FORD, RICHARD
4855 HILLSBORO BLVD
B-11
COCONUT CREEK, FL 33073 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: FORD, RICHARD
Address: 7696 N.W. 47TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067Title: D (X) Delete
Name: NIEMANN, JEFF
Address: 4855 HILLSBORO BLVD, SUITE B-11
City-St-Zip: COCONUT CREEK, FL 33073Title: D (X) Delete
Name: NIEMANN, PAUL
Address: 4855 HILLSBORO BLVD SUITE B-11
City-St-Zip: COCONUT CREEK, FL 33073Title: D (X) Delete
Name: FRITCHLEY, DAVID
Address: 4855 HILLSBORO BLVD, SUITE B-11
City-St-Zip: COCONUT CREEK, FL 33073**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
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: RSF

P

06/17/2009

Electronic Signature of Signing Officer or Director

Date