2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000040514

1. Entity Name DOCK 13, INC.



Principal Place of Business

1506 SE 14TH ST FORT LAUDERDALE, FL 33316 Mailing Address

1506 SE 14TH ST

FORT LAUDERDALE, FL 33316

FILED Jan 18, 2008 08:00 AM **Secretary of State**



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No Chg-P 01112008 CR2E034 (11/05)

4. FEI Number 20-0825719 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

VIVIES, PATRICK 700 E. DANIA BEACH BLVD #202 **DANIA, FL 33004**

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		 named entity submits this statement for the purpose of changit tions of registored agont. 	ng its registered office or registered agent, or both, in the State of	Florida. I am familiar with, an	d accept
SIG	NATURE.	<u> </u>			
	` ·	Signature, typed or nunted name of registered agent and title it applicable	(NOTE: Registered Agent signsture required when reinstating)	DATE	

* A 85" FILE NOW!!! FEE IS \$150.00 :: After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS ,10. IIILE -----NAME MEYJONADE, OLIVIER STREET ADDRESS 1506 SE 14TH ST CITY - ST-ZIP FORT LAUDERDALE, FL 33316 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET AUGRESS CITY-ST-ZIP

³⁰⁹000000789010 01/22/08+80006-021 150.00

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Litureby cortify that the information supplied with this filing does not qualify for the exemptions contained 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 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 officer like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED I ME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #