## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000069314

FILED Jan 19, 2005 Secretary of State

Entity Name: WATERMARK MARITIME CORP. **Current Principal Place of Business: New Principal Place of Business:** 249 SPRINGTIME DRIVE 249 SPRINGLINE DRIVE VERO BEACH, FL 32963 VERO BEACH, FL 32963 **Current Mailing Address: New Mailing Address:** 249 SPRINGTIME DRIVE 249 SPRINGLINE DRIVE VERO BEACH, FL 32963 VERO BEACH, FL 32963 FEI Number: 20-1055541 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: WASMUTH, DUANE L WASMUTH, DUANE L 249 SPRINGTIME DRIVE 249 SPRINGLINE DRIVE US US VERO BEACH, FL 32963 VERO BEACH, FL 32963 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: 01/19/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: **PRFS** ( ) Change (X) Addition WASMUTH, DUANE L Name: Name: 249 SPRINGLINE DRIVE Address: Address: City-St-Zip: City-St-Zip: VERO BEACH, FL 32963 US Title: () Delete Title: SECY ( ) Change (X) Addition Name: Name: WASMUTH, DUANE L 249 SPRINGLINE DRIVE Address: Address: VERO BEACH, FL 32963 US City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete TRES Name: WASMUTH, DUANE L Name: 249 SPRINGLINE DRIVE Address Address: City-St-Zip: City-St-Zip: VERO BEACH, FL 32963 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: DUANE L WASMUTH **PRES** 01/19/2005