2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000078863

Name:

Address:

City-St-Zip:

DOURVETAKIS, MINA

5525 NW 15 AVENUE, SUITE 302

FORT LAUDERDALE, FL 33309 US

Entity Name: FIRST LADY YACHT CHARTERS, INC.

FILED Apr 28, 2005 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
5525 NW 15 AVENUE SUITE 302 FORT LAUDERDALE, FL 33309				5525 NW 15 AVENUE SUITE 302 FORT LAUDERDALE, FL	_ 33309	US
Current Mailing Address:				New Mailing Address:		
5525 NW 15 AVENUE SUITE 302 FORT LAUDERDALE, FL 33309				5525 NW 15 AVENUE SUITE 302 FORT LAUDERDALE, FL 33309 US		
FEI Number	: 20-1423205	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	Certificate	of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SUITE 302 FORT LAU The above	JDERDALE, FL named entity set of Florida.	33309 US ubmits this statement for the	purpose c	of changing its registered o	ffice or reç	gistered agent, or both,
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	LOIACONO, FR. 5525 NW 15 AV	Delete ANK ENUE, SUITE 302 DALE, FL 33309 US		Title: () Name: Address: City-St-Zip:	Change () Addition
Title: Name: Address: City-St-Zip:	LIPMAN, RON 5525 NW 15 AV	Delete ENUE, SUITE 302 DALE, FL 33309 US		Title: () Name: Address: City-St-Zip:	Change () Addition
Title:	DS ()	Delete		Title: ()	Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RON LIPMAN CFO 04/28/2005