2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 25, 2005 8:00 am Secretary of State

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DOCUMENT # P0400091919 1. Entity Name SOUTHERN DRYDOCK, INC.									05 90128 049		
Principal Ptac	e of Business		Mailing Address				<u> </u>				
134-2 ERNEST STREET			P.O. BOX 13099			660 1876 3					
IACKSONVILLE, FL 32206			JACKSONVILLE, FL 32206				00010:00				
RECOUNTE	L, IL JEEW		MUNDONVICEE, I'E JZ	200			 	LER UTEN COIN BOTH COIN	FRANS ARIAN ARIAN ARIAN	E L e rr on e de Tuera	
2. Principal Place of Business 931 Bulkhead Road			3. Mailing Address 937 Bulkhead Road								
Suite, Apt. #, etc.			Suite, Apt. ≢, etc.				03142005	Chg-P	CR2E034 (10/00	3)	
City & State			City & State			4. FELAtumper		. 1	Applied For		
(preend	bue Spri		Green Covet		45,F	<u>-L</u>	30-	- <u>13386</u>	30 1	Not Applicable	
<u> 32204:</u>		<u>.5</u>	32043_	Count			5. Certificate of	Status Desired	\$8.75 A		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
					 -	 -					
HARWELL, EDWIN B 134-2 ERNEST STREET JACKSONVILLE, FL 32206						Siret Address (P.O. Box Number is Not Accoptable)					
City Core							- Oava	500-00	FL 298	\$2.10	
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 Porida. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE											
FILE NOWIII FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees											
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/C	HANGES TO OFFIC	CERS AND DIRECTO	BS IN 11	
TITLE	PTS		☐ Delete	TITLE		<u> </u>	7,22,11,0,70,		Change		
NAME	HARWELL, EDV	MN B		NAME	:	۱.					
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	certify that the info-	nation cumplied with	this filling close not qualify for			ad in Co-	tion 118 07/3\f3	Florida States 1 5	without mortification and the	in f	
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: Sa Harwell Edwin Harnel 4-19-05											