## 2007 FOR PROFIT CORPORATION. ANNUAL REPORT

## Feb 15, 2007 08:00 A Secretary of State **DOCUMENT # P05000037697** 1. Entity Name HYM BOAT PARTS, INC. Principal Place of Business Mailing Address 511 SW 3 AVE STE 1 511 SW 3 AVE STE 1 MIAMI, FL 33130 MIAMI, FL 33130 02122007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3906877 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HARTMAN, ROBERT DO NOT WRITE 511 SW 3 AVE STE 1 MIAMI, FL 33130 IN THIS SPACE 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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) U000000636732 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 02/26/07-80032-004 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DΡ TITLE HARTMAN, ROBERT NAME 511 SW 3 AVE STE 1 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33130 TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE

12. I hereby certify 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 of trustee employered 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 withfall time; like enjoywered.

NES.

SIGNATURE: \_

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

*2/13/07* 

305 279 7089

**FILED** 

Daytime Phone #