

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127010

FILED
Apr 11, 2006
Secretary of State

Entity Name: LAYBACK XXX PHANTOM BOATS CORP

Current Principal Place of Business:

P.O. BOX 343889
FLORIDA CITY, FL 33034

New Principal Place of Business:

16805 SW 97 AVENUE
MIAMI, FL 33157

Current Mailing Address:

P.O. BOX 343889
FLORIDA CITY, FL 33034

New Mailing Address:

16805 SW 97 AVENUE
MIAMI, FL 33157

FEI Number: 20-3474842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PELLETIER, YOEL
18730 SW 316 STREET
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

PELLETIER, YOEL
16805 SW 97 AVENUE
MIAMI, FL 33157 US

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: YOEL PELLETIER

04/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PELLETIER, YOEL
Address: P.O. BOX 343889
City-St-Zip: FLORIDA CITY, FL 33034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PELLETIER, YOEL
Address: 16805 SW 97 AVENUE
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: YOEL PELLETIER

PRES

04/11/2006

Electronic Signature of Signing Officer or Director

Date