## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000007108

Entity Name: SHIPYARD INTERNATIONAL SERVICE, INC.

FILED Mar 29, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	EAN DR APT 40 RDALE, FL 333							
Current Mailing Address:				New Mailing Address:				
1920 S OCEAN DR APT 404 FT LAUDERDALE, FL 33316				1920 S OCEAN DR APT 404 FT LAUDERDALE, FL 33316 US				
FEI Number: (	05-0631731	FEI Number Applied	l For ( ) FEI Nun	nber Not Appli	cable ( )	Certifica	ate of Status I	Desired ( )
Name and	Address of Cu	rrent Registered	Agent:	Name and	Address of	New Reg	jistered Ag	ent:
	BARE EAN DR APT 40 RDALE, FL 333							
The above r		bmits this stateme	ent for the purpose o	f changing it	s registered	office or I	registered a	gent, or both,
SIGNATURE:								
	Electronic	Signature of Reg	istered Agent				Date	
Election Cam	paign Financing 1	Trust Fund Contribut	ion ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PT () C SORDA, GIUSEP VIA ASSAROTTI GENOVA, GE 16	15 - 18 SC B		Title: Name: Address: City-St-Zip:	(	( ) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	D () C RONCO, ROMEO VIA TAGLIOLINI, GENOVA, GE 16	26B		Title: Name: Address: City-St-Zip:	(	( ) Change	( ) Addition	
	BUSSI, PAOLO	oelete STAGNETO 11 TRIES 4010 IT	TRE	Title: Name: Address: City-St-Zip:	D (BUSSI, PAOL VICOLO DEL TRIESTE, ITA	-O . CASTAGNE		
Title: Name: Address: City-St-Zip:	D () D IEMMOLO, PIETR VIA TOSCANA N. PADOVA, PD 35	2/A		Title: Name: Address: City-St-Zip:	(	( ) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	AS () C BUSSI, PAOLA 1410 20TH STRE MIAMI BEACH, FI			Title: Name: Address: City-St-Zip:	S ( BERTOLINI, O VIA GANDUC GENOVA, ITA	GRETA M CIO 9-2	()Addition 167 IT	
Title: Name: Address: City-St-Zip:	VP S () D DITEL, CESARE 1410 20TH STRE MIAMI, FL 33139			Title: Name: Address: City-St-Zip:	VP ( DITEL, CESA 1410 20TH S MIAMI, FL 33	RE TREET UNI	()Addition Γ 214	

I hereby certify that the information supplied with this filing does not qualify 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: GRETA M. BERTOLINI S 03/29/2009