2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment

May 03, 2007 8:00 am Secretary of State **DOCUMENT # P06000072748** 1. Entity Name 05-03-2007 90035 003 ***150 00 GREENFLASH YACHT SERVICES, INC. Principal Place of Business Mailing Address 500 SE 17TH STREET 900 NE 18TH AVENUE SUITE #220 FORT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33316 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04172007 Chg-P CR2E034 (12/06) 4. FEI Number Applied For City & State City & State Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YANKWITT, ERIC **500 SE 17TH STREET SUITE #220** FORT LAUDERDALE, FL 33316 8. The above named entity submits this statement for the purpose of changing ng its registered office or registered agent, or both, in the State of Florida. I am familia the obligations of registere SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Addition Delete NAME LUCKETT, MATTHEW NAME STREET ADDRESS 900 NE 18TH AVENUE #604 STREET ADDRESS CITY-ST-ZIP CITY-ST-70P FORT LAUDERDALE, FL 33316 ☐ Delete ☐ Change □ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITI F Detete TIDE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 suppliemental 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

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