2008 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 01-14-2008 90104 049 ***150 00 **DOCUMENT # P07000090585** 1. Entity Name THE NAUTICAL TRADER INC 40003476 Principal Place of Business Mailing Address 7257 FIRETHORNÉ DR 110 COLONIA LN. E. NOKOMIS, FL 34275 SARASOTA, FL 34240 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102008 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 26-0710106 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Gordon McKrehan FLORIDA-INCORPORATIONS.NET INC Street Address (P.O. Box Number is Not Acceptable 7 2 5 7 Free Thorne 3219 CORAL RIDGE DR. CORAL SPRINGS, FL 33065 Zip Code 34240 Cily Saras otA 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. Gordon Mckeehan President SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition TITLE TITLE Delete MCKEEHAN, GORDON NAME NAME 7257 FIRETHORNE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34240 CITY-ST-ZIP ☐ Change Addition THILE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition THE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE ☐ Change ☐ Addition THE ☐ Delete NAM€ NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP Change ☐ Addition HILE ☐ Delete NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 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.

Gordon McKechan

SIGNATURE:

FILED Jan 14, 2008 8:00 am