## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000098840

Entity Name: M D YACHT PAINT CORP

FILED Feb 04, 2008 Secretary of State

| Current Principal Place of Business:                           |  |   | New Principal Place of Business:                               |   |  |
|--|--|---|--|---|--|
| 8895 N ISLI<br>TAMARAC,  |  |   |  |   |  |
| Current Mailing Address:                                       |  |   | New Mailing Address:   |   |  |
| 8895 N ISLI<br>TAMARAC,  |  |   |  |   |  |
| FEI Number:  | 26-0829862                                 | FEI Number Applied For ( ) FEI Nur        | nber Not Appli   | cable ( ) Certificate of Status Desired ( )   |  |
| Name and   | Address of                                 | Current Registered Agent:                 | Name and   | Address of New Registered Agent:  |  |
| DANH, DUI<br>8895 N ISLI<br>TAMARAC,                           | E CIRCLE                                   | US  |  |   |  |
| The above in the State   |  | submits this statement for the purpose of | of changing it   | s registered office or registered agent, or both,   |  |
| SIGNATUR   | RE:  |   |  |   |  |
|  | Electro                                    | nic Signature of Registered Agent         |  | Date  |  |
| Election Cam   | ıpaign Financir                            | ng Trust Fund Contribution ( ).           |  |   |  |
| OFFICERS   | AND DIREC                                  | CTORS:                                    | ADDITION   | S/CHANGES TO OFFICERS AND DIRECTORS:  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:<br>Title:<br>Name: | DANH, DUNG<br>8895 N ISLE (<br>TAMARAC, FL |   | Title:<br>Name:<br>Address:<br>City-St-Zip:<br>Title:<br>Name: | P (X) Change ( ) Addition DANH, DUNG T NGOC 8895 N ISLE CIRCLE TAMARAC, FL 33321  P ( ) Change (X) Addition DANH, DUNG T NGOC |  |
| Address:<br>City-St-Zip:                                       |  |   | Address:<br>City-St-Zip:                                       | 8895 N. ISLES CIR.<br>TAMARAC, FL 33321 US  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                    | (  | ) Delete                                  | Title:<br>Name:<br>Address:<br>City-St-Zip:                    | P ( ) Change (X) Addition<br>M.D.YACTH PAINT CORP, .<br>8895 N.ISLES CIR.<br>TAMARAC, FL 33321 US                             |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                    | (  | ) Delete                                  | Title:<br>Name:<br>Address:<br>City-St-Zip:                    | P ( ) Change (X) Addition<br>M.D YACTH PAINT COR, P.<br>8895 N. ISLES CIR.<br>TAMARAC, FL 33321 US                            |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                    | (  | ) Delete                                  | Title:<br>Name:<br>Address:<br>City-St-Zip:                    | P ( ) Change (X) Addition<br>M.D.YACTH PAINT CORP, .<br>8895<br>TAMARAC, FL 33321 US  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                    | (  | ) Delete                                  | Title:<br>Name:<br>Address:<br>City-St-Zip:                    | P ( ) Change (X) Addition<br>M.D.YACTH PAINT CORP, .<br>8895 N.ISLES CIR.<br>TAMARAC, FL 33321 US                             |  |

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.

|            | Flateria Circutura of Circuia Office of Disease |   | D-1-       |
|------------|---|---|------------|
| SIGNATURE: | DUNG DANH                                       | Р | 02/04/2008 |