2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037401

Name:

Address: City-St-Zip: MASON, DEBORAH J

VALPARAISO, FL 32580

112 EDWARD CIR

FILED Apr 27, 2005 Secretary of State

| Entity Nam | ie: MASON M | MARINE PRODUCTS, INC. | | | | |
|---|---|---|---|--|-------------------------------|----------|
| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
| | RD CIRCLE 30, FL 32580 | US | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 909 MAR W STE 1014 FT WALTO | /ALT DR N BEACH, FL | 32547 | | | | |
| FEI Number: 59-3184337 FEI Number Applied For () | | FEI Number Not Appl | FEI Number Not Applicable () Certificate of Status Desired () | | 1() | |
| Name and | Address of C | urrent Registered Agent: | Name and | Name and Address of New Registered Agent: | | |
| 909 MAR W SUITE 1014 FT. WALTO | I DN BEACH, FL named entity s of Florida. | . 32547 US ubmits this statement for the | purpose of changing i | ts registered | office or registered agent, o | or both, |
| 0.014/11011 | | ic Signature of Registered A | gent | | Date | |
| Election Cam | paign Financing | Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | VD () MASON, DAVID 7 HIDDENCOVE VALPARAISO, F | CIR. | Title: Name: Address: City-St-Zip: | VD (MASON, DAV 278 GRANDV VALPARAISO | TEW | |
| Title: Name: Address: City-St-Zip: | DPC () MASON, DAVID 112 EDWARD C VALPARAISO, F | CIR. | Title: Name: Address: City-St-Zip: | (|) Change () Addition | |
| Title: | ST () | Delete | Title: | (|) Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Name:

Address:

City-St-Zip:

SIGNATURE: DAVID R MASON JR. DPC 04/27/2005