

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000073829

Entity Name: ABLE BOAT, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

15840 SW 84 AVENUE
MIAMI, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

15840 SW 84 AVENUE
MIAMI, FL 33157 US

New Mailing Address:

FEI Number: 65-0525181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURG, DONALD E
15840 SW 84 AVENUE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BURG, DONALD E
Address: 15840 S.W. 84TH AVE.
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: FABIAN, CARL E
Address: 5001 NE QUAYSIDE TERRACE, LONDON WALK
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Delete
Name: LACOMBE, RAY
Address: 1500 N.E. 105TH ST.
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Delete
Name: BEDNAR, DON
Address: 19645 E ST ANDREWS DR
City-St-Zip: HIALEAH, FL 33015

Title: D () Delete
Name: VAN DER WALL, ROBERT
Address: 1320 S. DIXIE HWY, SUITE 1275
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: TACKASUGI, ABE
Address: 5366 PASEO ORLANDO
City-St-Zip: SANTA BARBARA, CA 93111

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DONALD E BURG

PSD

04/15/2009

Electronic Signature of Signing Officer or Director

Date