2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

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Entity Name: FLORIDA BOAT SLIP CORPORATION

Current Principal Place of Business:

4833 COLLINS AVENUE
C/O OBR SUITE 1714
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 140668
CORAL GABLES, FL 33114 US

New Mailing Address:

FEI Number: 65-0663878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

M.J.F. REGISTERED AGENT CORP.
153 SEVILLA AVENUE
CORAL GABLES, FL 33134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MURRAY, JACQUES G
Address: 22 RUE DE L'ANTENEE
City-St-Zip: 1206 GENEVA, CH

Title: DS ( ) Delete
Name: PILLOIS, JEAN C
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DVP (X) Delete
Name: SEBAG, EMMANUEL
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DT (X) Delete
Name: POLLARD, RICHARD J
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: DVP (X) Delete
Name: SIMMONDS, JOEL L
Address: 4833 COLLINS AVENUE, SUITE 1714
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MURRAY, JACQUES G
Address: 10 BRUTON STREET 5TH FLOOR
City-St-Zip: W1J6PX LONDON, UK

Title: DS (X) Change ( ) Addition
Name: LEON, MARIE CLAIRE
Address: 1017 NORHT BEVERLY DRIVE
City-St-Zip: BEVERLY HILLS, CA 90210 US

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: JACQUES G MURRAY DP 05/01/2008

Electronic Signature of Signing Officer or Director Date