

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000046163

FILED
Jan 15, 2009
Secretary of State

Entity Name: BOATRIDES INTERNATIONAL, INC.

Current Principal Place of Business:

401 BISCAYNE BLVD.
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

555 NE 15 ST
SUITE 102
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 65-0622254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOFGE, CHARLES E
114 W SAN MARINO DR
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

SOFGE, HALEY
2705 HILOLA
MIAMI, FL 33133 US

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: HALEY SOFGE

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: SOFGE, HALEY
Address: 2705 HILOLA
City-St-Zip: MIAMI, FL 33133

Title: S () Delete
Name: ALCALDE, SANTIAGO
Address: 3318 SW 20TH ST
City-St-Zip: MIAMI, FL

Title: P () Delete
Name: THOMAS, JAMES
Address: 15211 SW 86TH AVE
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: THOMAS, RICHARD
Address: 15610 SW 84TH CRT
City-St-Zip: MIAMI, FL

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:

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: HALEY SOFGE

V

01/15/2009

Electronic Signature of Signing Officer or Director

Date