

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000097536

FILED
Mar 30, 2007
Secretary of State

Entity Name: KING SAILFISH MOUNTS INCORPORATED

Current Principal Place of Business:

5882 NE 14TH AVE
FT. LAUDERDALE, FL 33334

New Principal Place of Business:

5881 NE 14TH AVE
FT. LAUDERDALE, FL 33334 US

Current Mailing Address:

P.O. BOX 1688
POMPANO BEACH, FL 33061 US

New Mailing Address:

FEI Number: 65-0633375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D () Delete
Name: ARONSSON, ROBERT R
Address: 4747 NORTH OCEAN DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D () Delete
Name: DOUGLAS, RAYMOND
Address: 4747 NORTH OCEAN DRIVE, #223
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D () Delete
Name: DOUGLAS, LISA JEAN R
Address: 4747 NORTH OCEAN DRIVE, #223
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D () Delete
Name: YANUZZI, NICK J
Address: 4747 NORTH OCEAN DRIVE, #223
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ARONSSON, ROBERT R
Address: PO BOX 1688
City-St-Zip: POMPANO BEACH, FL 33061

Title: D (X) Change () Addition
Name: DOUGLAS, RAYMOND
Address: PO BOX 1688
City-St-Zip: POMPANO BEACH, FL 33061

Title: D (X) Change () Addition
Name: DOUGLAS, LISA JEAN R
Address: PO BOX 1688
City-St-Zip: POMPANO BEACH, FL 33061

Title: D (X) Change () Addition
Name: YANUZZI, NICK J
Address: PO BOX 1688
City-St-Zip: POMPANO BEACH, FL 33061

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA JEAN R DOUGLAS

D

03/30/2007

Electronic Signature of Signing Officer or Director

_____ Date