

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED

Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # P96000011866

1. Entity Name
J & G YACHT SALES, INC.



Principal Place of Business
757 S.E. 17TH STREET
SUITE 215
FORT LAUDERDALE, FL 33316

Mailing Address
1460 RT 9 NORTH
SUITE 203
WOODBIDGE, NJ 07095



02022005 No Chg-P CR2E034 (10/03)

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4. FEI Number
65-0643377

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAYES, WARREN D SR.
321 ROYAL POINCIANA PLAZA, SOUTH
PALM BEACH, FL 33480

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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
FREEDMAN, JOEL
6805 WILLOW WOOD DRIVE APT 5045
BOCA RATON, FL 33434

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
MAASS, ROBB R
321 ROYAL POINCIANA PLAZA SOUTH
PALM BEACH, FL 334800431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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02/24/05-80049-013 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joel Freedman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #