## **2008 FOR PROFIT CORPORATION** ANNUAL REPORT

## **FILED** Apr 30, 2008 08:00 AN te

DOCUMENT # P96000039019  1. Entity Name YACHTS EAST, INC.		Secretary of St	æ
Principal Place of Business Mailing Address 1811 N.W. 51 ST PO BOX 2530 HANGER 42C FORT LAUDERDALE, FL FT LAUDERDALE, FL 33309 US	33303		
DO NOT WRITE IN THIS SI	PACE	. 04292008 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For	
		65-066623 Not Applicat  5. Certificate of Status Desired Fee Required	ole
Name and Address of Current Registered Agent	1	1 de Madulles	_
DONALDSON, STEWART 1811 NW 51 ST HANGER 42-C FORT LAUDERDALE, FL 33309		DO NOT WRITE 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 acc 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			pt
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaig Trust Fund Contrib		U00000934611 05/23/08-80038-017 150.00	
10. OFFICERS AND DIRECTORS	4		-
NAME DPS DONALDSON, STEWART SIREET ADDRESS 1811 NW 51 ST HANGER 42-C GITY-ST-ZIP FORT LAUDERDALE, FL 33309			
TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP	100 to 10	DO NOT WRITE	,
TITLE NAME STREET ADDRESS		IN THIS SPACE	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR