2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 18, 2005 08:00 AM Secretary of State

				141 10, 2003 00.00	
DOCUMENT # P96000083696 1. Entity Name YACHT FOR A DAY PJL CORP.			Secretary of Stat		
Principal Place 13450 SAS MAM, FL 3		Mailing Address 13450 SW96 STREET MAM, FL 33186			
DO NOT WRITE IN THIS SPAC			CE	(P 9 6 0 0 0 0 8 3 6 9 6 P) 03062005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For Not Applicable 65-0706040 \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					
PORTNOY, RUBY 13450 SW 96 STREET MIAMI, FL 33186				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 accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little 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 \$5.00 May Be Trust Fund Contribution. Added to Fees					
10	OFFICERS AND D	IRECTORS			
NAME STREET ADDRESS CITY-ST-ZIP	D PORTNOY, RUBY 13450 SW 96 STREET MIAMI, FL 33186				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U3/18/US-80028-003 150.NO	
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12. I hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 cath; 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: 3/9/05 305-387-9006					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Deview Phone #					