2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 22, 2004 08:00 AM Secretary of State DOCUMENT # P97000049547 ALLIANCE YACHT SALES & SERVICE INC. Principal Place of Business Mailing Address 2208 IDLEWIND RD 2208 IDLEWIND RD #4 PALM BCH GARDENS, FL 33410 PALM BCH GARDENS, FL 33410 01212004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0756973 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent SMITH, T.C. DO NOT WRITE 2208 IDLEWILD RD #4 PALM BCH GARDENS, FL 33410 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 1 Signature, typed or printed name of registered agent and title 4 applicable. (NOTE, Registered Agent skirinting required when reinvision) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS TITLE SMITH, T.C. NAME 717 ROBIN WAY STREET ADDRESS 000000094189 03/22/04-80050-002 150.00 NORTH PALM BEACH, FL 33408 CITY-57-ZP BILE NAME SMITH, JANICE L STREET ARRESS 717 ROBIN WAY CITY-SI-ZIP NORTH PALM BEACH, FL 33408 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE 3133 F NAME STREET ADDRESS CTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 suppliamental 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURES:

FILED