## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P97000050784

FILED Mar 28, 2003 Secretary of State

Entity Name: INTERNATIONAL BOAT-SIDE-SERVICES, INC.

Current Principal Place of Business:			siness:	New Principal Place of Business:	
	H STREET				
UITE 319 T. LAUDE	RDALE, FL	33316	US		
	ailing Addre			New Mailing Addres	<b>56.</b>
	_			new manning , taure	
	'H STREET				
JITE 319 L. LAUDE	RDALE, FL	33316	US		
	65-0765517		umber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
	Address of	Current	Devictored Avents	Name and Address	of New Posistered Assets
ame and	Address of	Current	Registered Agent:	Name and Address	of New Registered Agent:
EFFLER, 57 SE 171	CHARLES				
JITE 319	RDALE, FL	33316 l	JS		
JITE 319 . LAUDE e above	RDALE, FL			purpose of changing its register	ed office or registered agent, or both,
JITE 319 LAUDE ne above the State	RDALE, FL named entity of Florida.			purpose of changing its register	ed office or registered agent, or both,
JITE 319 Γ. LAUDE ne above	RDALE, FL named entity of Florida. RE:	/ submits			ed office or registered agent, or both,  Date
JITE 319 LAUDE LE above the State GNATUR	RDALE, FL named entity of Florida. RE:Electro	/ submits onic Sign	this statement for the		
JITE 319  C. LAUDE  The above the State  GNATUR  The control of th	RDALE, FL named entity of Florida. RE:Electro	y submits onic Sign	ature of Registered Ag	ent	
JITE 319 LAUDE e above the State GNATUR ection Cam	RDALE, FL named entity of Florida. RE: Electro npaign Financi	y submits onic Sign	ature of Registered Ag	ent	Date
ITE 319 LAUDE e above the State GNATUR ction Cam FFICERS	RDALE, FL named entity of Florida. RE: Electro npaign Financi	y submits onic Sign ong Trust F CTORS:	ature of Registered Ag	ent  ADDITIONS/CHANG	Date  GES TO OFFICERS AND DIRECTOR
ITE 319 LAUDE above the State GNATUR ction Cam FICERS a: ne:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi  AND DIRE  VP ( GUDJONSDO 2311 NE 48TI	y submits  onic Sign  ng Trust F  CTORS:  ) Delete  ottir, Sig	ature of Registered Ag	ent  ADDITIONS/CHANG	Date  GES TO OFFICERS AND DIRECTOR
e above the State  GNATUR  ction Cam  FFICERS  e: me: dress:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi  AND DIRE  VP ( GUDJONSDO	y submits  onic Sign  ng Trust F  CTORS:  ) Delete  ottir, Sig	ature of Registered Ag	ent  ADDITIONS/CHANG  Title:  Name:	Date  GES TO OFFICERS AND DIRECTOR
e above the State GNATUR  ction Cam FFICERS e: me: dress: y-St-Zip:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi 6 AND DIRE  VP ( GUDJONSDO 2311 NE 48TI LIGHTHOUSE	onic Sign  ong Trust F  CTORS:  ) Delete  ottir, Sig  H STREET  E POINT, F	ature of Registered Ag	ent  ADDITIONS/CHANG  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition
e above the State GNATUR  ction Cam FFICERS e: me: dress: y-St-Zip: e:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi 6 AND DIRE  VP ( GUDJONSDO 2311 NE 48TI LIGHTHOUSE	onic Sign  ong Trust F  CTORS:  ) Delete  ottir, Sig  H STREET  E POINT, F	ature of Registered Ag	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:	Date  GES TO OFFICERS AND DIRECTOR
ITE 319 LAUDE e above he State GNATUR ction Cam FFICERS e: ne: lress: r-St-Zip: e: ne:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi S AND DIRE  VP ( GUDJONSDO 2311 NE 48TI LIGHTHOUSE	onic Sign  ong Trust F  CTORS:  ) Delete  OTTIR, SIG  H STREET  E POINT, F  () Delete  E	ature of Registered Ag  Fund Contribution ( ).  NY L 33064	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition
e above the State GNATUR  ction Cam FFICERS  e: me: dress: y-St-Zip: e: me: dress:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi S AND DIRE  VP ( GUDJONSDC 2311 NE 48TI LIGHTHOUSE  P ( LEFFLER, C	onic Sign  ong Trust F  CTORS:  Delete  OTTIR, SIG  H STREET  POINT, F  Delete  H STREET	ature of Registered Ag  Fund Contribution ( ).  NY L 33064	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition
JITE 319 LAUDE Le above the State GNATUR  Cotion Cam FFICERS e: me: dress: y-St-Zip: e: me: dress: y-St-Zip:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi AND DIRE  VP ( GUDJONSDO 2311 NE 48TI LIGHTHOUSE  P ( LEFFLER, C 2311 NE 48TI LIGHTHOUSE	onic Sign ong Trust F CTORS:  Delete OTTIR, SIG H STREET E POINT, F  Delete E H STREET E POINT, F	ature of Registered Ag  Fund Contribution ( ).  NY L 33064	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition
e above the State GNATUR  cotion Cam FFICERS e: me: dress: y-St-Zip: e: me: dress: y-St-Zip:	RDALE, FL named entity of Florida.  RE: Electro  paign Financi AND DIRE  VP ( GUDJONSDO 2311 NE 48TI LIGHTHOUSE  P ( LEFFLER, C 2311 NE 48TI LIGHTHOUSE  V (	onic Sign  onic Sign  onic Sign  Trust F  CTORS:  ) Delete  OTTIR, SIG  H STREET  POINT, F  Delete  E  H STREET  F POINT, F	ature of Registered Ag  Fund Contribution ( ).  NY L 33064	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition
JITE 319  LAUDE  LE above  The State  GNATUR  Control  Co	RDALE, FL named entity of Florida.  RE: Electro  paign Financi AND DIRE  VP ( GUDJONSDO 2311 NE 48TI LIGHTHOUSE  P ( LEFFLER, C 2311 NE 48TI LIGHTHOUSE	onic Sign  ong Trust F  CTORS:  Delete  OTTIR, SIG  H STREET  POINT, F  STREET  POINT, F  Delete  F  OTTIR  Delete  H STREET  OTTIR  Delete  H STREET  OTTIR  Delete  OBERT	ature of Registered Ag  Fund Contribution ( ).  NY L 33064	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Title: Title:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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: C. E. LEFFLER PRES 03/28/2003