

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

03-26-2004 90044 003 ***150.00

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1. Entity Name

CUSTOM BOAT TOPS & UPHOLSTERY, INC.



Principal Place of Business

**651 BLUE LANE
PORT CHARLOTTE FL 33952-6449**

Mailing Address

**651 BLUE LANE
PORT CHARLOTTE FL 33952-6449**

00110000



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0766257

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**VITIJ, JAMES
651 BLUE LANE
PORT CHARLOTTE FL 33952-6449**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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]

Signature, typed or printed name of registered agent and not applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	VITIJ, JAMES L	
STREET ADDRESS	20437 MIDWAY BLVD	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	VP	☐ Delete
NAME	VITIJ, JOAN M	
STREET ADDRESS	17395 HILLSBOROUGH BLVD	
CITY-ST-ZIP	PORT CHARLOTTE FL 33954	
TITLE	S	☐ Delete
NAME	VITIJ, JEFF W	
STREET ADDRESS	651 BLUE LANE	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	T	☐ Delete
NAME	VITIJ, LARRY F	
STREET ADDRESS	651 BLUE LANE	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
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TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing 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 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:

LARRY F. VITIJ

3/22/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Signature]