

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000029287

1. Entity Name

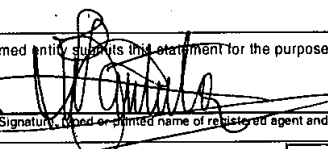
CONQUEST YACHT, INC.

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90346 040 ***150.00

845109

DO NOT WRITE IN THIS SPACE

Principal Place of Business 1650 NW 23rd AVE. BAY C FORT LAUDERDALE, FL 33311		Mailing Address 1650 NW 23rd AVE. BAY C FORT LAUDERDALE, FL 33311																	
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Suite Apt. #, etc. BAY C		Suite Apt. #, etc. BAY C																	
City & State FORT LAUDERDALE, FL		City & State FORT LAUDERDALE, FL																	
Zip 33011	Country USA	Zip 33011	Country USA																
4. FEI Number 65-0831546		Applied For <input type="checkbox"/> Not Applicable																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																	
6. Name and Address of Current Registered Agent BAPTISTA, RICHARD V. 1650 NW 23rd AVE. BAYC FORT LAUDERDALE, FL 33311		7. Name and Address of New Registered Agent Name BAPTISTA, RICARDO V. Street Address (P.O. Box Number is Not Acceptable) 1650 NW 23rd AVE. BAYC City FORT LAUDERDALE FL Zip Code 33311																	
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.																			
SIGNATURE  DPS		DATE 04/30/01																	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																	
FILE NOW! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State																			
11. OFFICERS AND DIRECTORS		12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11																	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 11 or Block 12 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE:  **DPS**

04/30/01

(954) 730-2320