

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000002895

1. Entity Name
PALM BEACH BOAT SALES, INC.



Principal Place of Business 7848 SOUTH FEDERAL HWY. HYPOLUXO, FL 33462	Mailing Address 7848 SOUTH FEDERAL HWY. HYPOLUXO, FL 33462
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DO NOT WRITE IN THIS SPACE



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0885923	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALTER, DINARDO
 5810 CADILLAC DRIVE
 LAKE WORTH, FL 33463

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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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	DINARDO, WALTER
STREET ADDRESS	5810 CADILLAC DR
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	D
NAME	BERMAN, LEO
STREET ADDRESS	2758 RONE DR
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	D
NAME	BERMAN, HARRIS
STREET ADDRESS	3560 S OCEAN BLVD
CITY-ST-ZIP	PALM BEACH, FL 33401
TITLE	P
NAME	WALTER, DINARDO
STREET ADDRESS	5810 CADILLAC DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 02/08/06-80084-007 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Walter Dinardo 1/24/06 561-371-5231
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #