

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 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**



01222007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0885923**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WALTER, DINARDO  
5810 CADILLAC DRIVE  
LAKE WORTH, FL 33463**

**DO NOT WRITE  
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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**U00000608219  
02/01/07-80001-015 150.00**

**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	

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/23/07 561-588-9911**  
Date Daytime Phone #