2004 FOR PROFIT CORPORATION

Feb 11, 2004 8:00 am **ANNUAL REPORT** Secretary of State DOCUMENT # P99000011878 02-11-2004 90020 007 ***150.00 1. Entity Name OUT ISLAND FOODS, INC. Principal Place of Business Mailing Address **UZUU404**D 1000 U.S. HIGHWAY ONE, #711 12765 W. FOREST HILL BLVD., #1305 JUPITER, FL 33477 WELLINGTON, FL 33414 2. Principal Place of Business O GILMAN YACHTS 3. Mailing Address Suite, Apt. #, etc. 01122004 CR2E034 (10/03) Chg-P Applied For 4. FEI Number City & State 65-0895047 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent OUNG YOUNG, DEAN P.O. Box Number is Not Acceptable) 1000 U.S. HIGHWAY ONE, #711 JUPITER, FL 33477 HIGHWAY 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 as and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!!. FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ТЛЕ Delete TITI F Change ■ Addition NAME YOUNG, DEAN NAME loung, Denn US HIGHWAY & 1000 U.S. HIGHWAY ONE, #711 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33477 CITY-ST-ZIP A/N BOACH FI DTS Change ■ Addition TITLE ☐ Delete TITLE YOUNG, HEATHER NAME NAME STREET ADDRESS 1000 U.S. HIGHWAY ONE, #711 STREET ADDRESS JUPITER, FL 33477 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$7-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITI.E NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change _ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

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