## **2001 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # P9900033362

1. Entity Name

MARITIME YACHT ENTERPRISES, INC.

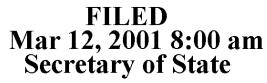
Principal Place of Business

Mailing Address

THE ACCOUNTING SEUSINESS CONSULTANTS INC

C/O ACCOUNTING&BUSINESS CONSULTANTS INC

17 ROSE DRIVE



03-12-2001 90444 006 \*\*\*150.00

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2. Principal P	Place of Busin	ness	3. Mailing Address											
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE							
City & State			City & State			<b>4.</b> F	El Number	65-09112	62			oplied For	}	
Zip	Country		Zip	Coun	Country		. Certificate of Status Desired			\$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent						7. N	lame and Ad	dress of New	Registere	ed Agent	1		1	
						Name								
HARF 17 RG FT LA		Street Address (P.O. Box Number is Not Acceptable)								-				
				C							FL Zip Code			
CONATURE		y submits this statement fo	r the purpose of changing its			egistered ag		in the State of	Fiorida.	E				
	Oignosio, typoo	or printed figures of regional ou agoin.	11011011011011011	z. mogratoro	a rigorii digilalar		T						┨	
Tax filing r		ible to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			0.00	1	on Campaign I Fund Contribu	_			<b>0</b> May Be I to Fees		
11.		OFFICERS AND	DIRECTORS	12.		AD	DITIONS/CH	ANGES TO O	FFICERS A	ND DIRE	CTOR	S IN 11	] _	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete HARRIS, WILLIAM M JR 17 ROSE DRIVE FT LAUDERDALE FL 33316										Change	☐ Addition	00/04/40/00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete								Change	Addition	200	
TITLE _			Delete	TITLI							Change	☐ Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete								Change	Addition		
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13. I hereby o	certify that th	e intormation supplied with	this filing does not qualify for	the exe	motion state	a in Section 1	119.07(3)(i). l	Fiorida Statute	s. I further i	certify tha	at the ir	ntormation	1	

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 if changed, or on an attachment with an address, with all other like empowered.

313-2396