

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000049796

1. Entity Name
OTT'S YACHTS, INC.



**FILED
Apr 21, 2005 08:00 AM
Secretary of State**

Principal Place of Business
407 LINCOLN ROAD
SUITE 5-B
MIAMI BEACH, FL 33139

Mailing Address
407 LINCOLN ROAD
SUITE 5-B
MIAMI BEACH, FL 33139



DO NOT WRITE IN THIS SPACE

04122005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0923277	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

MENDEZ, KAREN GARCIA
14548 S.W 95TH LN
MIAMI, FL 33186

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reauthorizing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PO
NAME OTT, LORI
STREET ADDRESS 1501 NW S. RIVER DRIVE
CITY-ST-ZIP MIAMI, FL 33125

U000000321376
04/21/05-60077-004 150.00

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 12, 2005 (305) 710 1527

Date

Daytime Phone #