


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000049851</b> 1. Entity Name A&J BOATS, INC.	
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Principal Place of Business 6795 NW 17TH AVE. FORT LAUDERDALE, FL 33309	Mailing Address 3280 NE 31 AVE. LIGHTHOUSE POINT, FL 33064
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04272005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0928521	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  EASTON, GALE 3280 NORTHEAST 31ST AVENUE LIGHTHOUSE POINT, FL 33064
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**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 reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV EASTON, ALLAN 3280 NORTHEAST 31ST AVENUE LIGHTHOUSE POINT, FL 33064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT EASTON, GALE 3280 NORTHEAST 31ST AVENUE LIGHTHOUSE POINT, FL 33064
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U00000356170  
05/04/05-80025-012 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

4/27/05 954-942-2215  
Date Daytime Phone #