

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91153 040 ***150.00

DOCUMENT # P99000049851

1. Entity Name
A&J BOATS, INC.



Principal Place of Business
4311 NORTHEAST 11TH TERRACE
POMPANO BEACH FL 33064

Mailing Address
431T NORTHEAST 11TH TERRACE
POMPANO BEACH FL 33064

2. Principal Place of Business
721 NE 42ND ST
Suite, Apt. #, etc.
POMPA

3. Mailing Address
3280 NE 31 AVE
Suite, Apt. #, etc.

City & State
OAKLAND PARK FL
Zip
33334
Country
BROWARD

City & State
LIGHTHOUSE PT FL
Zip
33064
Country
BROWARD

4. FEI Number
65-0928521

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

EASTON, GALE
3280 NORTHEAST 31ST AVENUE
LIGHTHOUSE POINT FL 33064

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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]* VICE PRES 4/28/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	DV	<input type="checkbox"/> Delete
NAME	EASTON, ALLAN	
STREET ADDRESS	3280 NORTHEAST 31ST AVENUE	
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	
TITLE	DT	<input type="checkbox"/> Delete
NAME	EASTON, GALE	
STREET ADDRESS	3280 NORTHEAST 31ST AVENUE	
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	
TITLE	DP	<input type="checkbox"/> Delete
NAME	HYDE, JAMES K	
STREET ADDRESS	4311 NORTHEAST 11TH TERRACE	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE	DS	<input type="checkbox"/> Delete
NAME	HYDE, ANNIE L	
STREET ADDRESS	4311 NORTHEAST 11TH TERRACE	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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] VICE PRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/2003 954-629-2856

Date Daytime Phone #

CR2E034 (10/02)