FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P9900055045

FILED Jun 24, 2002 8:00 am Secretary of State

06-24-2002 90297 027 ***150.00

1. Entity Name PLAYTIME BOATS, INC. 714 SW PINE ISLAND RD.				06-24-2002 9029 / 02 / ***15 •	50.00	
DO NOT WRITE IN THIS SPACE				969324		
2. Principal Place of Business 7/4 SW. PINE ISLAND Suite, Apt. #, etc.	LAND RD SAME Suite, Apt. #, etc.					
City & State	City & State			DO NOT WRITE IN THIS SPACE		
CAPE CORAL, FL			_		oplied For ot Applicable	
33991 Country USA	Zip Country			5. Certificate of Status Desired \$8.75 Additional Fee Required		
Name Name				Name and Address of Current Registered Agent		
DO NOT WRITE IN THIS SPACE			Street Address (P.O. Box Number is Not Acceptable) 624 SW 3RD TERR.			
		62.				
9 The share and all			CAPE (II)RAI FL (1990)			
8. The above named entity submits this statement for	the purpose of changing its re	egistered office or re	gistered ac	gent, or both, in the State of Florida.		
SIGNATURE Signature, typed or printed remotifiegistered agent an	d title if applicable. (NOTE:	Registered Agent signature n	equired when a	reinstating) OATE	<u>, </u>	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	y 1 Fee is \$150.00 , Fee is \$550.00 UBR is \$61.25 e to Department of			May Be to Fees		
11. OFFICERS AND D	IRECTORS			4		
TITLE NAME STREET ADDRESS CITY-ST-ZIP CAPE CORAL	TERR JFL 33991	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		4B (12/01)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			CR2E034B	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS		DO NOT WOITE		
TITLE		CITY-ST-ZIP		DO NOT WRITE		
NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. Thereby certify that the information supplied with the		TITLE NAME STREET ADDRESS CITY-ST-ZIP				

13 I nereby 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 attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Play Time Boats, Inc. 714 Pine Island Rd., S.W. Cape Coral, FL 33991 attachment 199000055045