## FILED Feb 13, 2002 8:00 am Secretary of State

02-13-2002 90161 028 \*\*\*150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 1. Entity Name

P99000063315

YACHT ELECTRICAL SERVICES, INC.

Principal Place of Business

Mailing Address

1326 S.E. 17TH ST., STE, 351 FT. LAUDERDALE FL 33316

1326 S.E. 17TH ST., STE, 351 FT. LAUDERDALE FL 33316

2. Principal Place	of Business	3. Mailing Address		
Suite, Apt. #, e	tc.	Suite, Apt. #, etc	:.	
City & State		City & State		
Zip	Country	Zip	Country	

DO NOT WRITE IN THIS SPACE

City & State		City & State	City & State		4. FEI Number <b>65-0935545</b>		Applied For	
							Not Applicable	
Zip	Country	Zip	Count	ry	5. Certificate of Status Desired		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7Name and Address of New Registered Agent				
				Name				
WALKER, TODD								
•				Street Address (	P.O. Box Number is Not Acceptable)			
1326 S.E. 17TI	1 ST., STE. 351							

(NOTE: Registered Agent signature required when reinstating)

FT. LAUDERDALE FL 33316

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.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back).

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

(000 01110		make officer t ayable	to bepartment or otate			
11.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Walker, Todd 631 NW 37TH Street Pompano Beach FL 33064	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Walker, Rebecca L 631 NW 37TH STREET POMPANO BEACH FL 33064	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[] Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	[] Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition	
13 I harahy c	ertify that the information cumplied with this	e filing doce not qualify for th	a avamption stated in Section	on 110 07/3Vi). Florida Statutos, I further certify that the in	oformation	

Thereby certify that the information supplied with this little does not qualify for the exemption stated in section 119.07(3)(), Florida statutes, forther certify that he 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 11 or Block 12 if