

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000084302

FILED
Apr 05, 2005
Secretary of State

Entity Name: YACHT CORROSION CONTROL, INC.

Current Principal Place of Business:

8729 1/2 EAST BAY DRIVE
TREASURE ISLAND, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

8729 1/2 EAST BAY DRIVE
TREASURE ISLAND, FL 33706 US

New Mailing Address:

FEI Number: 59-3605549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SICA, JOSEPH D
8729 1/2 EAST BAY DRIVE
TREASURE ISLAND, FL 33706 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SICA, JOSEPH D
Address: 8729 1/2 EAST BAY DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: VD () Delete
Name: JACKSON, TRANICE D
Address: 125 WEST 109TH ST., APT 4A
City-St-Zip: NEW YORK, NY 10025 US

Title: TD () Delete
Name: SICA, DARLENE M
Address: 8729 1/2 EAST BAY DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: SD () Delete
Name: JACKSON, DARRIN H
Address: 53 PINE ST.
City-St-Zip: STATEN ISLAND, NY 10301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: JACKSON, MAURICE
Address: 4005 SOUTH CHURCH ST
City-St-Zip: TAMPA, FL 33611 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SICA, DARLENE M
Address: 8729 1/2 EAST BAY DRIVE
City-St-Zip: TREASURE ISLAND, FL 33706 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH D. SICA

PD

04/05/2005

Electronic Signature of Signing Officer or Director

_____ Date