


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000087500</b>		
1. Entity Name GULFMASTER YACHT, INC.		
Principal Place of Business 5795 ORANGE DRIVE DAVIE, FL 33314	Mailing Address 5795 ORANGE DRIVE DAVIE, FL 33314	
<b>DO NOT WRITE IN THIS SPACE</b>		



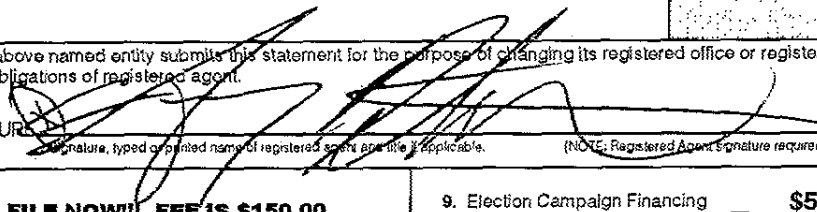
03132004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0953152	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  WHITE, GARY E 5795 ORANGE DRIVE DAVIE, FL 33314
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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  DATE 4/29/04  
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating))

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, GARY E 5795 ORANGE DRIVE DAVIE, FL 33314
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05/04/04-80161-010 150.00

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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  DATE 4/29/04 (954) 64-0008  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR