

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # V48061

1. Entity Name
RIVER SAFARIS & GULF CHARTERS, INC.



Principal Place of Business
10823 YULEE DR
HOMOSASSA, FL 34448 US

Mailing Address
10823 YULEE DR
HOMOSASSA, FL 34448 US



01072007 No Chg-P CR2E034 (11/05)

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4. FEI Number
59-3133226

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOWE, ALICIA
5543 W NOBIS CR
HOMOSASSA, FL 34448

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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, 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, 2007 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	RAPD LOWE, DENNIS 10823 YULEE DR HOMOSASSA, FL 34448
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD LOWE, ALICIA 10823 YULEE DR HOMOSASSA, FL 34448
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Alicia Lowe 3/28/07