2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # V57147

1. Entity Name
ADVENTURE TIMES KAYAKS, INC.

Principal Place of Business	Mailing Address
521 NORTHLAKE BLVD SUITE 1 NORTH PALM BEACH, FL 33408 US	521 NORTHLAKE BLVD. SUITE 1 NORTH PALM BEACH, FL 33408 US

DO NOT WRITE IN THIS SPACE

06092004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0351134	Not Applicable

5. Certificate of Status Desired   X $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WIGAL, STEPHEN
600-104 S ENTRADA WAY
PALM BCH GDNS, FL 33410

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 _Stephen H Wigal_   _Stephen H Wigal_   _6/9/04_

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 **Due by September 8, 2004**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	WIGAL, STEPHEN
STREET ADDRESS	600-104 SOUTH ENTRADA WAY
CITY-ST-ZIP	PALM BCH GDN, FL 33410

U000000162499
06/14/04-80001-002 158.75

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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)(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 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: _Stephen H Wigal_   _6/14/04_   _561 881 7218_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #