2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0400000695

Entity Name: SEABOARD SOLUTIONS, INC.

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
8001 NW 79 MIAMI, FL 3						
Current Mailing Address:			New Mailing Address:			
9000 WEST ATTN: TAX MERRIAM,		Т				
FEI Number: 2	20-0673554	FEI Number Applied For ()	El Number Not Appli	licable () Certificate of Status Desired ()		
Name and	Address of Cเ	ırrent Registered Agent:	Name and	Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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.						
SIGNATUR		Signature of Registered Agent		Date	-	
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	NS/CHANGES TO OFFICERS AND DIRECTO	RS:	
Title: Name: Address: City-St-Zip: Title: Name: Address:	BRESK, STEVEN 9000 WEST 67TI MISSION, KS 66 VTD () D STEER, ROBER 9000 WEST 67TI	H STREET 202 Delete F L H ST	Title: Name: Address: City-St-Zip: Title: Name: Address:	V/D (X) Change () Addition BRESKY, STEVEN J 9000 WEST 67TH STREET MERRIAM, KS 66202 () Change () Addition		
City-St-Zip: Title: Name: Address: City-St-Zip:	MERRIAM, KS 6 ASV () [CROUTCH, WILL 8001 NW 79TH A MIAMI, FL 33166	Delete IAM H VE	City-St-Zip: Title: Name: Address: City-St-Zip:	P (X) Change () Addition GONZALES, EDWARD A 8001 NW 79TH AVE MIAMI, FL 33166		
Title: Name: Address: City-St-Zip:	VS () [BECKER, DAVID 9000 WEST 67TI MERRIAM, KS 6	M ∃ST	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	V () [ARTIDIELLO, HE 8001 NW 79TH A MIAMI, FL 33160	VE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	V ()[BRECHEISEN, B 8001 NW 79TH A MIAMI, FL 33160	VE	Title: Name: Address: City-St-Zip:	()Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBERT STEER VTD 04/08/2009