

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M16558

1. Entity Name

OCEAN BANKSHARES, INC.

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90113 019 ***158.75

Principal Place of Business

Mailing Address

780 N.W. 42ND AVENUE
 STE 300
 MIAMI FL 33126
 US

780 N.W. 42ND AVENUE
 STE 300
 MIAMI FL 33126-5536
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2541622

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONSEGRA, LUIS
780 NW 42ND AVE, STE 300
MIAMI FL 33126

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	DE SOUSA MACEDO, A.	
STREET ADDRESS	780 NW 42ND AVE, STE 300	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	DE SOUSA MACEDO, JOAO	
STREET ADDRESS	780 NW 42ND AVE, STE 300	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	PEREZ C., BENIGNO	
STREET ADDRESS	780 NW 42ND AVE, STE 300	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	DE ABREU, JOSE QUINTINO	
STREET ADDRESS	780 NW 42ND AVE, STE 300	
CITY-ST-ZIP	MIAMI FL	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	CONCEPCION, JOSE A.	
STREET ADDRESS	780 NW 42ND AVE, STE 300	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	DA CORTE, DOMINGO LEONAR	
STREET ADDRESS	780 NW 42ND AVE, STE 300	
CITY-ST-ZIP	MIAMI FL	

TITLE	CD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Luis A. Consuegra	
STREET ADDRESS	780 NW 42nd Ave Ste 300	
CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Luis A. Consuegra	
STREET ADDRESS	780 N.W. 42nd Ave. Ste. 300	
CITY-ST-ZIP	Miami FL 33126	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Luis A. Consuegra **3/6/00 (305) 569-5453**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)