

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001211

FILED  
Apr 19, 2006  
Secretary of State

Entity Name: SEA TECH MACHINES INTERNATIONAL, INC.

**Current Principal Place of Business:**

1720 EAST ADAMS STREET  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 49116  
JACKSONVILLE BEACH, FL 32202

**New Mailing Address:**

P.O. BOX 49116  
JACKSONVILLE BEACH, FL 32240

FEI Number: 01-0635776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HEEKIN, T. GEOFFREY ESQ  
C/O HEEKIN, MALIN, & WENZEL, P.A.  
P.O. BOX 477  
JACKSONVILLE, FL 32201 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/S ( ) Delete  
Name: HOPKINS, TOM  
Address: 1720 E. ADAMS STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: VPT ( ) Delete  
Name: KOWKABANY, JOHN B  
Address: 1720 E. ADAMS STREET  
City-St-Zip: JACKSONVILLE, FL 32202

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TRACEE PETERS-GAULT

CFO

04/19/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date