

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000077503

FILED
Jan 15, 2007
Secretary of State

Entity Name: SEA BREEZE INTERNATIONAL MANAGEMENT CORP.

Current Principal Place of Business:

3600 B BROADWAY
STE. 6
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 101149
CAPE CORAL, FL 33910

New Mailing Address:

FEI Number: 06-1639289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICCIANI, MATHIS, & JESSEN, CPA
6371-4 PRESIDENTIAL CT.
FORT MYERS, FL 33919 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: D () Delete
Name: LANGENBACH, MANUELA C
Address: 3524 SE 1ST PLACE
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete
Name: LANGENBACH, HEIMO W
Address: 3524 SE 1ST PLACE
City-St-Zip: CAPE CORAL, FL 33904

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: HEIMO W. LANGENBACH

VP

01/15/2007

Electronic Signature of Signing Officer or Director

Date