


**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90783 014 \*\*\*150.00

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**14018899**

DOCUMENT # P03000095897			
1. Entity Name SEASITE ENVIRONMENTAL MARINE COATINGS INC.			
Principal Place of Business 1180 NW 163 ROAD MIAMI, FL 33169 US		Mailing Address 1180 NW 163 ROAD MIAMI, FL 33169 US	
2. Principal Place of Business 1180 NW 163 <sup>RD</sup> DRIVE		3. Mailing Address 1180 NW 163 <sup>RD</sup> DRIVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33169		Zip 33169	
Country		Country	
4. FEI Number 52-2395565		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PALMER, PALMER & MANGIERO, P.A. 12790 SOUTH DIXIE HIGHWAY MIAMI, FL 33155		7. Name and Address of New Registered Agent: Name Street Address (F.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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signatures typed or printed name of registered agent and file filer (NOTE: Registered Agent's signature required, when remaining)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete MURRAY GINSBERG 1180 NW 163 <sup>RD</sup> DRIVE MIAMI, FL 33169	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 <i>Murray Ginsberg</i>		Date 4/30/04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Time Phone # 305-474-4545	