

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000033229

FILED
Sep 05, 2008
Secretary of State

Entity Name: OCEAN CONSTRUCTION LIMITED INC

Current Principal Place of Business:

8656 SW 114 PL
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

8656 SW 114 PL
MIAMI, FL 33173

New Mailing Address:

17654 SW 47TH STREET
MIRAMAR, FL 33029

FEI Number: 20-2424314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBEL, KRISTEN G
8656 SW 114 PL
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

CAMPBELL, KRISTEN G
8656 SW 47TH STREET
MIAMI, FL 33173 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.

SIGNATURE: KRISTEN CAMPBELL

09/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAMPBEL, KRISTEN G
Address: 8656 SW 114 PL
City-St-Zip: MIAMI, FL 33173

Title: VP (X) Delete
Name: CAMPBEL, JODIE-ANN
Address: 8656 SW 114 PL
City-St-Zip: MIAMI, FL 33173

Title: TRES (X) Delete
Name: CHIN, ANNMARIE
Address: 8656 SW 114 PL
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: CAMPBEL, NORMAN G
Address: 8656 SW 114 PL
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAMPBELL, KRISTEN G
Address: 8656 SW 114 PL
City-St-Zip: MIAMI, FL 33173

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

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

Title: D (X) Change () Addition
Name: CAMPBELL, NORMAN G
Address: 8656 SW 114 PL
City-St-Zip: MIAMI, FL 33173

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: NORMAN CAMPBELL

D

09/05/2008

Electronic Signature of Signing Officer or Director

Date