## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000095331

Name:

Address:

City-St-Zip:

KESSLER, JAMES D

PALMETTO, FL 34221

4044 4TH AVENUE WEST

Entity Name: OCEAN VIEW GROUP, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	H DRIVE WELERS SUITE 104 RSBURG, FL 33701	US	300 BEACH DRIVE RONAY JEWELERS SI ST. PETERSBURG, FL		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 67 ST.PETER	7214 SBURG, FL 33736	US	300 BEACH DRIVE RONAY JEWELERS SI ST.PETERSBURG, FL		
FEI Number:	20-3106160 FEI Nu	ımber Applied For ( ) FE	l Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent				New Registered Agent:	
ALFREDO J. RONAY 5918 SKIMMER POINT BOULEVARD SOUTH GULFPORT, FL 33707 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.				
SIGNATUR					
Electronic Signature of Registered Agent Date					
Election Can	npaign Financing Trust F	und Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES ( ) Delete RONAY, ALFREDO J 5918 SKIMMER POINT E GULFPORT, FL 33707	BOULEVARD SOUTH	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SEC ( ) Delete BASS-DE-RONAY, MASH 5918 SKIMMER POINT E GULFPORT, FL 33707		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title:	VICE (X) Delete		Title: (	) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ALFREDO J. RONAY PRES 04/23/2007