## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P96000024638**

1. Entity Name

EAST OCEAN DEVELOPMENT CORPORATION



05-03-2005 90118 046 \*\*\*150.00

May 03, 2005 8:00 am Secretary of State

**FILED** 

Principal Place of Business

3015 NORTH OCEAN BLVD., SUITE 121 FT. LAUDERDALE, FL 33308

Mailing Address

3015 NORTH OCEAN BLVD., SUITE 121 FT. LAUDERDALE, FL 33308



CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

04292005 No Chg-P

4. FEI Number Applied For 65-0657980 Not Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOSTER, R A 3015 N OCEAN BLVD STE 121 FT. LAUDERDALE, FL 33309

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

Rebecca A Foster 4/29/05 954.563.2444

Date

Daytime Phone #

	•					
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				required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.			~ —	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZP	DPS FOSTER, REBECCA A 3015 NORTH OCEAN BLVD., SUITE FORT LAUDERDALE, FL 33308	121				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT LANDAU, MARC J 3015 NORTH OCEAN BLVD., SUITE FORT LAUDERDALE, FL 33308	121				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS						
CITY-ST-ZIP						
TITLE NAME						
STREET ADDRESS			1			
CITY-ST-ZIP	$\sim$		1 _			
12. I hereby certify that the information sopplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental eport 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR