2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000024638

1. Entity Name
EAST OCEAN DEVELOPMENT CORPORATION



FILED

06 HAY 11 PH 3: 00

Principal Place of Business

Mailing Address

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

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



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 65-0657980 Not Applied For Not Applied For Status Desired Sample Required Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

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

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

04272006

| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) | | | | | DATE |
|--|--|-------|--------------------------------|-----------------------|-------------------------|
| FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fin. Trust Fund Contribution | | ing 🗆 | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | CTORS | | | * |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPS FOSTER, REBECCA A 3015 NORTH OCEAN BLVD., SUITE FORT LAUDERDALE, FL 33308 | 121 | | 40007 <u>6</u> 202514 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVT LANDAU, MARC J 3015 NORTH OCEAN BLVD., SUITE FORT LAUDERDALE, FL 33308 | 121 | | 9 571 | 4/9501035004° **5495.00 |
| 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 CITY-ST-ZIP | | | | | |
| 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied entitle 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 by trustee employee do 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 employeered. | | | | | |

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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