2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000106210

1. Entity Name
SEA SCREAMER PCB INC.

Principal Place of Business	Mailing Address
5325 N. LAGOON DR. PANAMA CITY BEACH, FL 32408 US	7211 LAGOON DR. PANAMA CITY BEACH, FL 32408 US

04232007   No Chg-P   CR2E034 (11/05)

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4. FEI Number
59-3481096

Applied For
Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

REDMOND, ANDREW E MR
7211 LAGOON DRIVE
PANAMA CITY BEACH, FL 32408

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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_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	REDMOND, ANDREW E
STREET ADDRESS	7211 LAGOON DIRVE
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32408
TITLE	VPST
NAME	REDMOND, CYLIA J
STREET ADDRESS	7211 LAGOON DRIVE
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32408
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/11/07-80003-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ Cylia J Redmond   4/25/07   850 2353000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #