2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 16, 2007 8:00 am **Secretary of State DOCUMENT # 168327** 01-16-2007 90210 024 ***158.75 THE SEA COLONY, INC. Mailing Address Principal Place of Business C/O JOHN DICERCHIO 1400 SOUTH OCEAN BLVD. 1400 SO. OCEAN BLVD. **60001203** POMPANO BEACH, FL 33062 LAUDERDALE BY THE SEA, FL 33062 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1400 SO OCEAN BLVD Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 01112007 Chg-P Applied For 4 FEI Number City & State City & State 59-0679535 Not Applicable LAVDER DALE-BY. THE- SEA Zio Country \$8.75 Additional 5. Certificate of Status Desired 33062 BROWARD 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TUDZAROV, LOUISE E Street Address (P.O. Box Number is Not Acceptable) 345 WEST OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33311 Zip Code FL 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. DATE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change Addition TITLE □ Delete TITLE MILANESE, JON NAME NAME 21860 CYPRESS PALM COURT STREET ADDRESS STREET ADDRESS CITY-ST-7P BOCA RATON, FL 33428 CITY-ST-7IP ☐ Addition Delete ☐ Channe TETE F THELEN, BONNIE NAME NAME STREET ADDRESS 87 WATERTHRUSH CRES. STREET ADDRESS KANATA, ONTARIO CANADA, k2m 2v1 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition Detete TITLE KRUK, MICHAEL NAME NAME **2611 NW 41ST STREET** STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL. [7] Change ☐ Addition TITLE ☐ Delete TITLE DI CERCHO, JOHN NAME STREET ADDRESS STREET ADDRESS **4622 HAMMOCK CIRCLE** CITY-ST-70 DELRAY BEACH, FL 33445 CITY-ST-ZIP DIRECTOR ☐ Addition Detete TITLE MILE ST. CLAIR, CHARLES NAME **CYNTHIA ELIAS** NAME STREET ADDRESS 12090 N.W. 3RD DRIVE STREET ADDRESS 4302 ST. CLAIR BRIDGE RD. JARRETTSVILLE, MD 21084 CITY-ST-ZIP CORAL SPRINGS, FL. 33071 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITL F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 chapter 607 or an attachment with an address, with all other like empowered. 11/2007 SIGNATURE: DIG OFFICER OR DIRECTOR

FILED

D', CERCHIO TREAS.