

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 508374

**FILED**  
**Aug 24, 2005**  
**Secretary of State**

**Entity Name:** MARSEAN TRADERS, INC.

**Current Principal Place of Business:**

247 SW 8TH STREET #207  
MIAMI, FL 33130

**New Principal Place of Business:**

**Current Mailing Address:**

247 SW 8TH STREET #207  
MIAMI, FL 33130

**New Mailing Address:**

FEI Number: 59-1763299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COUTTS, IAN  
1260 N.W. 29 STREET  
MIAMI, FL 33142 US

**Name and Address of New Registered Agent:**

COUTTS, IAN S PRES  
151 SE 15 RD, APT 1602,  
MIAMI, FL 33129 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.

SIGNATURE: IAN S. COUTTS

08/24/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: COUTTS, IAN,  
Address: 511 ORIOLE AVENUE  
City-St-Zip: MIAMI, FL 33166

Title: V ( ) Delete  
Name: COUTTS, SEAN,  
Address: 5321 GRANADA BLVD.  
City-St-Zip: CORAL GABLES, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/S (X) Change ( ) Addition  
Name: COUTTS, IAN S P/S  
Address: 151 SE 15 RD, APT 1602,  
City-St-Zip: MIAMI, FL 33129

Title: VP (X) Change ( ) Addition  
Name: COUTTS, SEAN M VP  
Address: 5400 SW 80 STREET,  
City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: SEAN M. COUTTS

VP

08/24/2005

Electronic Signature of Signing Officer or Director

Date