2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748467

Entity Name: SEA WASH ASSOCIATION, INC.

FILED Apr 07, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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7400 HARDING AVE

APT. #6

City-St-Zip:

MIAMI BEACH, FL 33141 US

Current Mailing Address: New Mailing Address:

309 23 ST 7400 HARDING AVE

300 APT. #6

MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33141 US

FEI Number: 59-1994859 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

VODA, TIMOTHY SAMUEL, EDWARD 309 23 ST 7400 HARDING AVE. 300 6

MIAMI BCH, FL 33139 US MIAMI BCH, FL 33141 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: EDWARD SAMUEL 04/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MIAMI BEACH, FL 33141

itle: P () Delete Title: PD (X) Change () Addition

 Name:
 SAMUEL, EDWARD
 Name:
 SAMUEL, EDWARD

 Address:
 7400 HARDING AVE, APT 6
 Address:
 7400 HARDING AVE, APT 6

 City-St-Zip:
 MIAMI BEACH, FL 00000,
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: PD () Delete Title: VD (X) Change () Addition

Name: AMSTER, HELEN, Name: ESTRADA, RAUL

 Address:
 7400 HARDING AVE APT 19
 Address:
 7400 HARDING AVE APT 2

 City-St-Zip:
 MIAMI BEACH, FL 00000,
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: D () Delete Title: DST (X) Change () Addition
Name: LEBLANC, PAULINE Name: CASTELLANOS, ALMA

Address: 7400 HARDING AVE APT 3 Address: 7400 HARDING AVE APT 22
City-St-Zip: MIAMI BCH, FL 00000, City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ESTRADA, RAOUL
 Name:
 BUILES, MARTHA

 Address:
 7400 HARDING AVE, APT 2
 Address:
 7400 HARDING AVE, APT 19

 City-St-Zip:
 MIAMI BCH, FL
 City-St-Zip:
 MIAMI BEACH, FL 33141

 Title:
 () Delete
 Title:
 D () Change (X) Addition

 Name:
 Name:
 QUINTERO, DELFA

 Address:
 Address:
 7400 HARDING AVE., APT. 21

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: EDWARD SAMUEL P 04/07/2009