

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 13, 2007 8:00 am**  
**Secretary of State**

04-13-2007 90173 020 \*\*\*150.00

DOCUMENT # 815513

1. Entity Name

OCEAN EAST APARTMENTS INC.



Principal Place of Business

1530 SOUTH OCEAN BLVD  
POMPANO BEACH FL 33062

Mailing Address

1530 SOUTH OCEAN BLVD  
POMPANO BEACH FL 33062

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 59-0821101

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEROSIER, CHERYL  
1530 S OCEAN BLVD  
POMPANO BEACH FL 33062

Name

Steve Pierpoint

Street Address (P.O. Box Number is Not Acceptable)

1530 S Ocean Blvd

City

Pompano Beach,

FL

Zip Code  
33062

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

*Stephen Pierpoint*  
Stephen Pierpoint

President

4/2/07

(Signature, typed or printed name of registered agent and title r applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete  
NAME PIERPOINT, STEVE  
STREET ADDRESS 1530 SOUTH OCEAN BLVD  
CITY- ST- ZIP POMPANO BEACH FL 33062

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE S ☒ Delete  
NAME DESROSIER, CHERI  
STREET ADDRESS 1530 S. OCEAN BLVD  
CITY- ST- ZIP POMPANO BEACH FL 33062

TITLE VP ☐ Change ☒ Addition  
NAME Burley, Jeff  
STREET ADDRESS 1530 S. Ocean Blvd.  
CITY- ST- ZIP Pompano Beach, FL 33062

TITLE T ☐ Delete  
NAME AFRAISIBI, KAREN  
STREET ADDRESS 1530 SOUTH OCEAN BLVD  
CITY- ST- ZIP POMPANO BEACH FL 33062

TITLE D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE VP ☐ Delete  
NAME KLEIN, ROBERT  
STREET ADDRESS 1530 S. OCEAN BLVD  
CITY- ST- ZIP POMPANO BEACH FL 33062

TITLE T ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE VP ☒ Delete  
NAME KLEIN, ROBERT  
STREET ADDRESS 1530 S OCEAN BLVD  
CITY- ST- ZIP POMPANO BEACH FL 33062

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME HENNESSEY, JAMES  
STREET ADDRESS 1530 S OCEAN BLVD  
CITY- ST- ZIP POMPANO BEACH FL 33065

TITLE S ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Stephen Pierpoint*

President

4/2/07

954-941-8715

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #