

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004966

FILED
Jan 14, 2008
Secretary of State

Entity Name: SEADREAM YACHT CLUB LIMITED CORPORATION

Current Principal Place of Business:

601 BRICKELL KEY DR.
SUITE 1050
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

601 BRICKELL KEY DR.
SUITE 1050
MIAMI, FL 33131

New Mailing Address:

FEI Number: 52-2339751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNCAN, LYALL J
601 BRICKELL KEY DR.
SUITE 1050
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: PIMENTEL, LARRY
Address: ONE GROVE ISLE DR. APT 1708
City-St-Zip: COCONUT GROVE, FL 33133

Title: S () Delete
Name: LYALL, DUNCAN
Address: 601 BRICKELL KEY DR. SUITE 1050
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: BRYNESTAD, ATLE
Address: VOKENKOLLVEIGN 53
City-St-Zip: OSLO, NORWAY, N-061

Title: D () Delete
Name: STOKKE, LYNN SEM
Address: VOKSENKOLLVIEW 53
City-St-Zip: OSLO, NORWAY, N-061

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYALL DUNCAN

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01/14/2008

Electronic Signature of Signing Officer or Director

_____ Date