

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90021 045 ***150.00

DOCUMENT # F03000002020	
1. Entity Name SOUND & SEA TECHNOLOGY, INC.	

Principal Place of Business 11931 MAPLEWOOD AVE. EDMONDS, VA- 98026-3113	Mailing Address 11931 MAPLEWOOD AVE. EDMONDS, VA 98026-3113
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2. Principal Place of Business SOUND & SEA TECHNOLOGY Suite, Apt. #, etc. 11931 MAPLEWOOD AVE. City & State EDMONDS WA Zip 98026-3113 Country USA	3. Mailing Address SOUND & SEA TECHNOLOGY Suite, Apt. #, etc. 11931 MAPLEWOOD AVE. City & State EDMONDS WA Zip 98026-3113 Country USA
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01072004 Chg-P CR2E034 (10/03)

4. FEI Number 91-2135865	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HANDLEY, SHARON 30 HILLBROOK WAY PENSACOLA, FL 32503	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P MEGGITT, JUDITH A 11931 MAPLEWOOD AVE. EDMONDS, VA 980263113	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
ST MEGGITT, DALLAS J 11931 MAPLEWOOD AVE. EDMONDS, VA 980263113	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PRESIDENT MEGGITT, JUDITH A. 11931 MAPLEWOOD AVE. EDMONDS, WA 98026-3113	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
ST MEGGITT, DALLAS J. 11931 MAPLEWOOD AVE. EDMONDS, WA- 98026-3113	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:  **JUDITH A. MEGGITT** (425) 743-1282

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #