


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2006 8:00 am
Secretary of State

08-24-2006 90063 020 ***150.00

DOCUMENT # G30435 1. Entity Name SOUTHBAY ECOSYSTEMS, INC.	
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Principal Place of Business 313 LAYNE BLVD HALLANDALE, FL 33009 US	Mailing Address 313 LAYNE BLVD HALLANDALE, FL 33009 US
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40101831

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



07272006 Chg-P CR2E034 (11/05)

4. FEI Number 13-4285030	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LESHAW, MARTIN B 313 LAYNE BLVD. HALLANDALE, FL 33009	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 \$550.00 Due by September 6, 2006	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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LESHAW, MARTIN B 313 LAYNE BLVD. HALLANDALE, FL 33009 <input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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 exemptions contained 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 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:  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date: **7/25/06** Daytime Phone #: **305 321-6996**



Division of Corporations ATTACHMENT

2006 Annual Report 40101831

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

	This information cannot be changed on the report.
Document Number	G30435
Business Entity Name	SOUTHBAY ECOSYSTEMS, INC.
Original File Date	03/25/1983

FEI Number 13-4285030

Principal Address 313 LAYNE BLVD
HALLANDALE, FL 33009 US

Mailing Address 313 LAYNE BLVD
HALLANDALE, FL 33009 US

Registered Agent MARTIN B LESHAW
313 LAYNE BLVD.
HALLANDALE, FL 33009 US

Officer/Director Name And Address

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MARTIN B LESHAW
313 LAYNE BLVD.
HALLANDALE, FL 33009

After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

If all of the above information is correct and you do not wish to make any changes, please select:

(No Changes)

If you need to make changes to the above information, please select:

(Make Changes)