2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H43664

Entity Name: OCEAN CLUB ASSOCIATES INC

FILED Jan 19, 2005 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
% 979 BEACHLAND BLVD VERO BEACH, FL 32963			2828 CORAL WAY SUITE 210 MIAMI, FL 33145		
Current M	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
% 979 BEACHLAND BLVD VERO BEACH, FL 32963			2828 CORAL WAY SUITE 210 MIAMI, FL 33145	SUITE 210	
FEI Number:	: 59-2627218	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
C/O MR. E 979 BEAC	WILLEN C B. T. COOKSEY HLAND BLVD. ACH, FL 3296				
The above in the State	named entity see of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	nt	Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () BONELLI, FERI 2828 SW 22 ST MIAMI, FL 331	Г., STE. 208	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () NOZZI, NESTO 2828 SW 22 ST MIAMI, FL 331	Г., STE. 208	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () ONDARCUHU, 0 2828 SW 22 ST MIAMI, FL 331	Г., STE. 208	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	AT () NIJLAND, WILL	Delete EM C	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: FERNANDO BONELLI PD 01/19/2005

2828 SW 22 ST., STE. 208

MIAMI, FL 33145

Address:

City-St-Zip: