


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # J00491 1. Entity Name DAY-TONA SEABREEZE, INC.	
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Principal Place of Business 4851 KELLER SPRINGS RD 222 ADDISON, TX 75001-6261 US	Mailing Address 4851 KELLER SPRINGS RD 222 ADDISON, TX 75001-6261 US
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01292008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-2092401	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

**HOOD, CHARLES D JR
SMITH, HOOD, PERKINS, LOUCKS, & STOUT, PA
444 SEABREEZE BLVD., SUITE 900
DAYTONA BEACH, FL 32118**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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 PD	LITOFF, ELIOT
NAME	4851 KELLER SPRINGS RD 222
STREET ADDRESS	ADDISON, TX 750016261
CITY-ST-ZIP	
TITLE AS	LITOFF, CAROL
NAME	4851 KELLER SPRINGS RD 222
STREET ADDRESS	ADDISON, TX 750016261
CITY-ST-ZIP	
TITLE VSD	LITOFF, HAROLD
NAME	628 N. STATE STREET, APT. 7
STREET ADDRESS	BELLINGHAM, WA 98225
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U00000813601
02/13/08-80010-018-158-75

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: Eliot D. Litoff Eliot D. Litoff 1/29/08 972-380-8933

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