2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J38723

1. Entity Name SEA HAWK, INC.



Principal Place of Business Mailing Address

4600 46TH AVE PO BOX 276 CORTEZ, FL 34215 4600 46TH AVE PO BOX 276 CORTEZ, FL 34215

FILED May 01, 2007 08:00 A Secretary of State

9417941249



DO NOT WRITE IN THIS SPACE

04282007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2819949 Applied For
Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BELL, DOUGLAS 8708 50TH AVE. W. BRADENTON, FL 34210

SIGNATURE:

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

Signature Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when renalishing)					DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financin Trust Fund Contribution.	g 🗆	\$5.00 May Be Added to Fees	000000751598 05/18/07-80105-008 2100.00
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BELL, WALTER T. 12115 45 AVE W CORTEZ, FL		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BELL, CALVIN E 12115 45 AVE W CORTEZ, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BELL, CARL D. 8708 50 AVE W BRADENTON, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS C4TY-ST-ZIP					
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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