

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90372 044 ***150.00

DOCUMENT # K06095 1. Entity Name SEAMTRESS EXPRESS, INC.					
Principal Place of Business 1318 SEELEY CIRCLE NW PALM BAY, FL 32907 US			Mailing Address 1318 SEELEY CIRCLE NW PALM BAY, FL 32907 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2864704 56-2489350	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SAGUCIO, FUSAKO 1318 SEELEY CIR NW PALM BAY, FL 32907				7. Name and Address of New Registered Agent Name SMITH, RALPH J. Street Address (P.O. Box Number is Not Acceptable) 1318 SEELEY CIRCLE NW City PALM BAY FL Zip Code 32907	
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: RALPH J. SMITH, PRESIDENT 4/13/06 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAGUCIO, FUSAKO 1318 SEELEY CIR NW PALM BAY, FL 32907	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, RALPH J. 1318 SEELEY CIRCLE NW PALM BAY, FL 32907
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST SMITH, RALPH J. 1318 SEELEY CIR NW PALM BAY, FL 32907	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, RALPH 1318 SEELEY CIR NW PALM BAY, FL 32907	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: FUSAKO SAGUCIO, VP 4-13-06 321-726-6695 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					