

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011156

Entity Name: SEA PEEPER AMERICA, LLC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

PO BOX 191101
MIAMI BEACH, FL 331199978

New Principal Place of Business:

P.O. BOX 813818
HOLLYWOOD, FL 330813818

Current Mailing Address:

PO BOX 191101
MIAMI BEACH, FL 331199978

New Mailing Address:

P.O. BOX 813818
HOLLYWOOD, FL 330813818

FEI Number: 65-1039900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KWARTIN, STEVEN M
1743 MICHIGAN AVENUE, #3
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

KWARTIN, STEVEN M
4214 BUCHANAN STREET
HOLLYWOOD, FL 33021 US

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.

SIGNATURE:

04/29/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRD () Delete
Name: WASTE INVESTMENTS, I, NC.
Address: PO BOX 191101
City-St-Zip: MIAMI BEACH, FL 331199978

Title: D () Delete
Name: TOV MEOD, INC,
Address: 4747 HOLLYWOOD BLVD STE 186
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES:

Title: MGRD (X) Change () Addition
Name: WASTE INVESTMENTS, I, NC.
Address: P.O. BOX 813818
City-St-Zip: HOLLYWOOD, FL 330813818

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEVEN KWARTIN

M

04/29/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date