

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016893

Entity Name: SEA OCEAN LLC

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

5300 N.W. 12TH AVENUE, SUITE 1
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

5300 N.W. 12TH AVENUE, SUITE 1
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 11-3743582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOGERMAN, RICHARD M ESQ.
C/O RICHARD M. MOGERMAN, P.A.
150 SOUTH PINE ISLAND ROAD, SUITE 130
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MERCER, LEONARD J
Address: 5300 N.W. 12TH AVENUE, SUITE 1
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: MGRM () Delete
Name: DANAN, PATRICK
Address: 5300 N.W. 12TH AVENUE, SUITE 1
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: LEO, FRANK
Address: 5300 N.W. 12TH AVENUE, #1
City-St-Zip: FT LAUDERDALE, FL 33309

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: PATRICK DANAN

MGRM

04/23/2007

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