


FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90122 017 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L07000084941

1. Entity Name
OCEANVIEW RESOURCES, LLC



Principal Place of Business Mailing Address
 9417 CAVENDISH DRIVE, #105 9417 CAVENDISH DRIVE, #105
 TAMPA, FL 33626 TAMPA, FL 33626

60020984



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Subs. Apt. #, etc. Subs. Apt. #, etc.

City & State City & State

Zip Country Zip Country

01042008 Chg-LLC CR2E083 (12/08)

4. FEI Number Applied For
 26-1078288 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HOOK, JUSTIN
 9417 CAVENDISH DRIVE, #105
 TAMPA, FL 33626

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 *Justin Hook - President* DATE 1-7-08
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering))

FILE MONTH FEE IS \$138.75 After May 1, 2008 Fee will be \$238.75 Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	MGRM	ESSENTIAL SOLUTIONS, INC.	9417 CAVENDISH DRIVE, #105 TAMPA, FL 33626	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
CHIEF FINANCIAL OFFICER	John CALAGANO	26 Gregory Ave	Bradford, PA 16701	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. 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 is true and accurate and that my 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 register or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Justin Hook - President* DATE 1-7-2008 813-892-0404
(Signature, typed or printed name of existing managing member, manager, or authorized representative)