2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

DOCUMENT # L30494 Feb 26, 2007 08:00 AM 1. Entity Name **Secretary of State** SEA BREEZE CHARTERS, INC. Principal Place of Business Mailing Address 13670 77TH TERRACE SEBASTIAN FL 32958 13670 77TH TERRACE SEBASTIAN FL 32958 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suito, Apt. #, etc. 1st MOORE . CR2E034 (10/06) City & State Applied For City & Stato 4. FEI Number 65-0161072 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo JANSEN, TERRY L Street Address (P.O. Box Number is Not Acceptable) 13670 77TH TERRACE SEBASTIAN FL 32978 City Zin 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 Signature, typed or printed name of registered agent and life r applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition 11111 ☐ Defete THEF Change JANSEN, TERRY L. NAMI NAMI^{*} <u>U</u>Q00000646994 13670 77TH TERRACE STREET ADDRESS STREET ADDRESS 03/06/07-80054-017 150.00 SEBASTIAN FL CITY-S1-ZIP CHY-S1-7IP ☐ Delete ☐ Change Addition HHI HILE JANSEN, TERRY L. NAME 13670 77TH TERRACE STRULL ADDRESS SHILL LADDRESS SEBASTIAN FL CITY-ST-7/P CITY ST-ZIP Delete THE Change Addition NAM NAME STREET ADDRESS STREET ADDRESS CHY+SI-/IP CHY-S1-ZIP Derete 1010 ☐ Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CHY-SI-7IP CHY-ST-7P Addition Delete Change NAMI NAMI' STREET ADDRESS STRUCT ADDRESS CITY-S1-ZIP CITY+SI-ZIP шт Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CHY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. 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 eath; 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 Statutos; 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.

FILED

FL JANSEN 2-21-207 772-388-DETOR DEVISED PROJECT 1832