2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P00000066796

SEA DAN ENTERPRISES, INC.



Principal Place of Business

250 N.W. 12TH STREET FLORIDA CITY, FL 33034 Mailing Address

250 N.W. 12TH STREET FLORIDA CITY, FL 33034

FILED Jan 24, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01192005 No Chg-P CR2E034 (10/03)

05 4004047	
65-1024017	

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

PEREZ, GEORDANIA 250 N.W. 12TH STREET BAY 7 FLORIDA CITY, FL 33034

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or re	egistered agent, or bo	th, in the State of Florida. 1 am familia	with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable (NOTE Registered	d Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	U00000190820 01/24/05-80145-029	5 150.00
10.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · · ·		. ,
TITLE NAME STREET AODRESS CITY-ST-ZIP	PSDP PEREZ, GEORDANIS 982 N.E. 4TH AVENUE HOMESTEAD, FL 33030					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTDP MACIAS, JUAN C 16269 S.W. 304TH TERRACE HOMESTEAD, FL 33030		, , ,			
TITLE NAME STREET ADDRESS CITY-51-ZIP				DO	NOT WRITE	:
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PROTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #