

2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000011696

1. Entity Name

OCEAN PLASTERING CORP



FILED

04 NOV -4 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



AMENDED \$61.25

Principal Place of Business Mailing Address
8465 NW 168 Terr 8465 NW 168 Terr
Miami, FL 33016 Miami, FL 33016

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Same as above Same as above

Zip Country Zip Country

4. FEI Number Applied For
65-1076542 Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Eulogio Morales
8465 NW 168 Terr
Miami, FL 33016

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003, Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME EULOGIO MORALES
STREET ADDRESS 8465 NW 168 Terr
CITY-ST-ZIP Miami, FL 33016

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD
NAME MATILDE MORALES
STREET ADDRESS 8465 NW 168 Terr
CITY-ST-ZIP Miami, FL 33016

TITLE PSD
NAME MATILDE MORALES
STREET ADDRESS 8465 NW 168 Terr
CITY-ST-ZIP Miami, FL 33016

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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.

SIGNATURE: [Signature]

Sept 1/04

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CR2E034 (10/02)