2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000023512

1. Entity Name

SEAHORSE ENTERPRISES INTERNATIONAL **INCORPORATED**



FILED Jun 19, 2006 08:00 AN **Secretary of State**

Principal Place of Business

Mailing Address

2454 SUGAR LOAF LANE FT LAUDERDALE, FL 33312 2454 SUGAR LOAF LANE FT LAUDERDALE, FL 33312

		#
05042006	No Chg-P	CR2E034 (11/05)

Applied For 4. FEI Number 65-1081878 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHIN, CONSTANCE A 2454 SUGAR LOAF LANE FT LAUDERDALE, FL 33312

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	named entity submits this statement for the ions of registered agent.	purpose of changing its registe	ered office or r	egistered agent, or be	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and bit	e if sopicable. (NOTE: Registe	red Apert signature	e required when reinstating)	DATE
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006	9. Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRE	ECTORS	1	•	I
TITLE	D				
NAME	CHIN, CONSTANCE A				
STREET ADDRESS	2454 SUGAR LOAF LANE				
CITY - ST - ZIP	FT LAUDERDALE, FL 33312				U0000056728S
TITLE	D				06/19/06-80001-013 150.00
NAME	MURRAY, TERRY S				
STREET ADDRESS	2454 SUGAR LOAF LANE				
CITY-ST-ZIP	FT LAUDERDALE, FL 33312				
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NAME					
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NAME					

12. 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 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:

STREET ADDRESS CITY-ST-ZIP

FIGER OR DIRECTOR

Daytime Phone #