

**2006 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT**

FILED

06 JUN 19 AM 10: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05222006 Chg-P CR2E034 (11/05)

4. FEI Number **65-1154611** Applied For Not Applicable

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

DOCUMENT # P01000103377
1. Entity Name
4301 OCEAN DR., INC.



Principal Place of Business
**4301 OCEAN DR.
FT. LAUDERDALE, FL**

Mailing Address
**3191 CORAL WAY SUITE 1008
MIAMI, FL 33145**

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

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent
SOSTCHIN, GUILLERMO
3191 CORAL WAY #1008
MIAMI, FL 33145

7. Name and Address of New Registered Agent
Name **David Stone, Esq.**
Street Address (P.O. Box Number is Not Acceptable)
3191 Coral Way, Suite 1008
City **Miami** FL Zip Code **33145**

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]* DATE: **06/15/06**

Amended AR is **\$61.25**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOSTCHIN, GUILLERMO 3191 CORAL WAY #1008 MIAMI, FL 33145 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STONE, DAVID E 3191 CORAL WY, # 1008 MIAMI, FL 33143 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition David Stone, Esq. 3191 Coral Way, Suite 1008 Miami, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer & Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Henrietta Sostchin 3191 Coral Way, #1008 Miami, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600076718566 06/29/06--01047--020 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>JC 6/20</i>

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: *[Signature]* **HENRIETTA SOSTCHIN** DATE: **6/6/06** DAYTIME PHONE #: **(305) 984 0402**