2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000103659

1. Entity Name SEA SAINT, INC.

Principal Place of Business

5945 SW 85 AVE MIAMI, FL 33143 Mailing Address

5945 SW 85 AVE MIAMI, FL 33143

FILED Mar 19, 2004 08:00 AM Secretary of State



01202004

No Chg-P

CR2E034 (10/03)

4. FEI Number 01-0621355

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

SANDERS, DOUGLAS J 13627 DEERING BAY DR STE 704 CORAL GABLES, FL 33158

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MARCH 17, 2004 Daylime Phone #

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)						
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campalgn Financ Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAMONS, CATHERYN C 10451 SW 46 TERR MIAMI, FL 33165				U00000032620 03/19/04-80016-009 150.00	
title name street address city-st-zip	D MORGAN, CYNTHIA D 5945 SW 85 AVE MIAMI, FL 33143					
TITLE NAME STREET ADDRESS CRY-ST-ZIP	P SAINT-GAUDENS, RICHARD 5945 S.W. 85 AVENUE MIAMI, FL 33143	·	DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CHY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY - ST-ZIP						
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)(f), 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 gath, 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.						