2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086629

Name:

Address:

City-St-Zip:

2612 KINGS CIR.

LAWRENCEVILLE, GA 30044

FILED Apr 30, 2004 Secretary of State

Entity Name: SEA BISCUITS BAKERY, INC. **Current Principal Place of Business: New Principal Place of Business:** 4255 A1A SOUTH #7 ST. AUGUSTINE, FL 32080 **Current Mailing Address: New Mailing Address:** 4255 A1A SOUTH #7 ST. AUGUSTINE, FL 32080 FEI Number: 11-3646947 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OLIVER, DEBBIE OLIVER, RICHARD 4057 SEMINOLE PT. CT. 6100 A1A SOUTH SAINT AUGUSTINE, FL 32086 #517 SAINT AUGUSTINE, FL 32080 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. SIGNATURE: RICHARD OLIVER 04/30/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition OLIVER, II, RICHARD Name: Name: 4057 SEMINOLE PT. CT. Address: Address: City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: Title: Title: CEO () Delete () Change () Addition Name: OLIVER, DEBBIE Name: 4057 SEMINOLE PT. CT. Address: Address: SAINT AUGUSTINE, FL 32086 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition VINCENT, DANIEL J Name: Name: 2906 PHARR COURT SOUTH NW, STE 2212 Address: Address: City-St-Zip: ATLANTA, GA 30305 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition STEWART, PATRYCIA M

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD OLIVER II CEO 04/30/2004