

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096484

FILED
Apr 29, 2004
Secretary of State

Entity Name: OCEAN BREEZE DEVELOPMENT, INC.

Current Principal Place of Business:

31 OCEAN REEF DRIVE C202
KEY LARGO, FL 33037

New Principal Place of Business:

31 OCEAN REEF DRIVE C302
KEY LARGO, FL 33037

Current Mailing Address:

31 OCEAN REEF DRIVE C202
KEY LARGO, FL 33037

New Mailing Address:

31 OCEAN REEF DRIVE C302
KEY LARGO, FL 33037

FEI Number: 37-1440885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERSAUD, SAMUEL A ESQ.
1320 SOUTH DIXIE HIGHWAY
SUITE 715
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BURKE, JAMES
Address: 31 OCEAN REEF DRIVE C202
City-St-Zip: KEY LARGO, FL 33037

Title: PVST () Delete
Name: BURKE, MITA M
Address: 31 OCEAN REEF DRIVE C202
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: BURKE, MITA M
Address: 31 OCEAN REEF DRIVE C202
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BURKE, JAMES
Address: 31 OCEAN REEF DRIVE C302
City-St-Zip: KEY LARGO, FL 33037

Title: PVST (X) Change () Addition
Name: BURKE, MITA M
Address: 31 OCEAN REEF DRIVE C302
City-St-Zip: KEY LARGO, FL 33037

Title: D (X) Change () Addition
Name: BURKE, MITA M
Address: 31 OCEAN REEF DRIVE C302
City-St-Zip: KEY LARGO, FL 33037

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.

SIGNATURE: MITA BURKE

MRS.

04/29/2004

Electronic Signature of Signing Officer or Director

Date