2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000016112

Entity Name: OCEAN CAPITAL VENTURES, INC.

FILED Feb 14, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
SUITE 390				
TAMPA, F	L 33647 US			
Current Mailing Address:		New Mailing Address:		
15310 AM SUITE 390	BERLY DRIVE			
TAMPA, F				
FEI Number	: 33-1044793 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired	()	
Name and	l Address of Current Registered Ag	ent: Name and Address of New Registered Agent:		
SUITE 390 TAMPA, F The above	BERLY DRIVE) 'L 33647 US	or the purpose of changing its registered office or registered agent, o	or both,	
SIGNATU	RE:			
	Electronic Signature of Registe	red Agent Date		
Election Ca	mpaign Financing Trust Fund Contribution	().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIR	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PRES () Delete HOBBS, RUSS 15310 AMBERLY DRIVE, SUITE 390 TAMPA, FL 33647 US	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	TREA () Delete HOBBS, RUSS 15310 AMBERLY DRIVE, SUITE 390 TAMPA, FL 33647 US	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	SEC () Delete HOBBS, RUSS 15310 AMBERLY DRIVE, SUITE 390 TAMPA, FL 33647 US	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	DIR () Delete HOBBS, RUSS 15310 AMBERLY DRIVE, SUITE 390 TAMPA, FL 33647 US	Title: () Change () Addition Name: Address: City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: RUSS HOBBS PRES 02/14/2007