ANNUAL REPORT

FILED Feb 27, 2008 08:00 AN Secretary of State **DOCUMENT # P03000054281** 1. Entity Name FINE ART AUCTIONS AT SEA, INC. Principal Place of Business Mailing Address 3711 PRESIDENTIAL DRIVE 3711 PRESIDENTIAL DRIVE PALM HARBOR, FL 34685 PALM HARBOR, FL 34685 02212008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 14-1884606 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent SHEINBERG, STUART DO NOT WRITE 3711 PRESIDENTIAL DRIVE PALM HARBOR, FL 34685 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS CEOD TITLE SHEINBERG, STUART NAME STREET ADDRESS 3711 PRESIDENTIAL DRIVE PALM HARBOR, FL 34685 CITY-ST-ZIP U00000840790 03/07/08-80007-003 150.00 PD TITLE SHEINBERG, DARICE NAME STREET ADDRESS 3711 PRESIDENTIAL DRIVE CITY-ST-ZIP PALM HARBOR, FL 34685 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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 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 trusted 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5/11/08

Daytime Phone 4