


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000089297 1. Entity Name SEA BREEZE REAL ESTATE AND INVESTMENT, INC.	
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Principal Place of Business 28870 US HWY 19 N SUITE300 CLEARWATER, FL 33761 US	Mailing Address 3074 WINDMOOR DR. N PALM HARBOR, FL 34685 US
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DO NOT WRITE IN THIS SPACE



07112005 No Chg-P CR2E034 (10/03)

4. FEI Number 30-0195230	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FALCO, CAROLYN
3074 WINDMOOR DR. N
PALM HARBOR, FL 34685

**DO NOT WRITE
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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FALCO, CAROLYN 3074 WINDMOOR DR. N PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FALCO, JOSEPH T 3150 WINDMOOR DR. N PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC CLIFTON, SUZAN 3150 WINDMOOR DR. N PALM HARBOR, FL 34685
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carolyn Falco CAROLYN FALCO 7/11/05 (727) 784-7902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #