## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000025313

Address:

City-St-Zip:

2755 TREMONT ST.

PHILADELPHIA, PA 19136 US

FILED Jan 31, 2005 Secretary of State

Entity Na	me: SEA BLU	JE INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	HWY. 27 SOU , FL 33870	TH US				
Current Mailing Address:			New Maili	New Mailing Address:		
	HWY. 27 SOU , FL 33870	TH US				
FEI Number	: 87-0719052	FEI Number Applied For	( ) FEI Number Not Appl	icable ( ) Certificate of Statu	ıs Desired ( )	
Name and	l Address of	Current Registered Age	ent: Name and	Address of New Registered A	Agent:	
	TOMY BHOUSE DR. TY, FL 33566					
	named entity e of Florida.	submits this statement f	or the purpose of changing i	ts registered office or registered	agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Register	red Agent	Date		
Election Car	mpaign Financir	ng Trust Fund Contribution (	).			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( THOMAS, TOM 2208 CLUBHO PLANT CITY, I	OUSE DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VP ( CHAZHICATTU 2755 TREMOI PHILADELPHI	NT ST.	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition CHAZHICATTU, JOSEPH C 2618 THUNDERBIRD ROAD SEBRING, FL 33872 US		
Title: Name: Address: City-St-Zip:	SEC. ( THOMAS, LUC 2208 CLUBHO PLANT CITY, I	OUSE DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name:	TRE. ( CHACHICATTI	) Delete J. JOSEPH C	Title: Name:	TRE. (X) Change ( ) Addition		

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.

Address:

City-St-Zip:

SEBRING, FL 33870 US

202 PARK CREST TERRACE

SIGNATURE: TOMY THOMAS PRE. 01/31/2005