

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134913

FILED
Feb 12, 2009
Secretary of State

Entity Name: 89 SEACREST, INC.

Current Principal Place of Business:

17395 NORTH BAY RD
#108
SUNNY ISLES BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

17395 NORTH BAY RD
#108
SUNNY ISLES BEACH, FL 33160 US

New Mailing Address:

FEI Number: 20-1948754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASSERSTROM, KEITH
1909 TYLER STREET
PENTHOUSE
HOLLYWOOD, FL 33020 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: P () Delete
Name: LEYBOVICH, LAZAR
Address: 317 AVENUE O
City-St-Zip: BROOKLYN, NY 11230 US

Title: VP () Delete
Name: SAVITSKY, BORIS
Address: 20 JOSEPH COURT
City-St-Zip: MONMOUTH JUNCTION, NJ 08852

Title: T () Delete
Name: ARONOV, IGOR
Address: 5 PARK VIEW PLACE
City-St-Zip: FAIRLAWN, NJ 07610 US

Title: S () Delete
Name: ARONOV, YAN
Address: 3325 HIGH STREET
City-St-Zip: FAIRLAWN, NJ 07610 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LAZAR LEYBOVICH

P

02/12/2009

Electronic Signature of Signing Officer or Director

_____ Date