2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000163806

Entity Name: TROPICAL WAVE SEAFOOD INC

FILED Aug 03, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
211 AVEN FORT PIE	UE A RCE, FL 34950 US			
Current M	ailing Address:	New Mailing Address	ss:	
211 AVEN FORT PIE	UE A RCE, FL 34950 US			
FEI Number:	20-1960776 FEI Number Applied	For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			of New Registered Agent:	
	IA ONCORD DR NT LUCIE, FL 34983 US			
	named entity submits this stateme e of Florida.	nt for the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Regis	stered Agent	Date	
	ce with s. 607.193(2)(b), F.S., the corpor npaign Financing Trust Fund Contributi			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete CHIN, LENA 358 NW CONCORD DR PORT SAINT LUCIE, FL 34983 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete SMITH, NADIA 358 NW CONCORD DR PORT SAINT LUCIE, FL 34983 US	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: LENA CHIN PRES 08/03/2005