

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170680

Entity Name: OCEAN VIBES, INC.

FILED  
Apr 20, 2011  
Secretary of State

**Current Principal Place of Business:**

21 GRANT ST  
SAINT AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

305 FOURTH STREET  
SAINT AUGUSTINE, FL 32084

**New Mailing Address:**

FEI Number: 20-1931585

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZYLKOWSKI, ELIZABETH A  
305 FOURTH STREET  
SAINT AUGUSTINE, FL 32084 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ZYLKOWSKI, ELIZABETH A  
Address: 305 FOURTH STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: SEC  
Name: ZYLKOWSKI, ELIZABETH A  
Address: 305 FOURTH STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: TREA  
Name: ZYLKOWSKI, ELIZABETH A  
Address: 305 FOURTH STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: DIR  
Name: ZYLKOWSKI, ELIZABETH A  
Address: 305 FOURTH STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH A ZYLKOWSKI

P

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date