

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000121952

FILED  
Apr 28, 2011  
Secretary of State

Entity Name: OCEAN RESTORATION USA INC.

**Current Principal Place of Business:**

6608 N BLOSSOM AVE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

6608 N BLOSSOM AVE  
TAMPA, FL 33614

**New Mailing Address:**

FEI Number: 20-4089384      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

RODRIGUEZ, WILFREDO  
6608 N BLOSSOM AVE  
TAMPA, FL 33614    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: RODRIGUEZ, WILFREDO  
Address: 6608 N BLOSSOM AVE  
City-St-Zip: TAMPA, FL 33614

Title: S  
Name: GARCIA DE RODRIGUEZ, SARA M  
Address: 6608 N BLOSSOM AVE  
City-St-Zip: TAMPA, FL 33614

Title: VP  
Name: SEGOVIA NORAT, OSIEL  
Address: 6915 N. THATCHER AVE  
City-St-Zip: TAMPA, FL 33614

Title: VP  
Name: SEGOVIA, SILVIO  
Address: 6915 N. THATCHER AVE  
City-St-Zip: TAMPA, FL 33614

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: WILLFREDO RODRIGUEZ

P

04/28/2011

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

\_\_\_\_\_ Date