2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000142270

Entity Name: SEAFOOD HEAVEN INC.

FILED Jun 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6415 W. COLONIAL DRIVE SUITE EAST ORLANDO, FL 32818

New Mailing Address: Current Mailing Address:

PO BOX 585216 6415 W. COLONIAL DRIVE ORLANDO, FL 32858 SUITE EAST ORLANDO, FL 32818

FEI Number: 20-3643221 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:

BROOKS, CRYSTAL C WILLIAMS, TAMILYA 1526 SACKETT CIRCLE 4469 GOLDENRAIN CT. ORLANDO, FL 32818 US ORLANDO, FL 32808

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: TAMILYA WILLIAMS 06/17/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BROOKS, CRYSTAL C WILLIAMS, TAMILYA Name: Name:

1526 SACKETT CIRCLE 4469 GOLDENRAIN CT. Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818

() Delete Title: Title: (X) Change () Addition

Name: WILLIAMS, TAMILYA L Name: WILLIAMS, TAMILYA L 3213 SPLIT WILLOW DRIVE Address: 4469 GOLDENRAIN CT Address: ORLANDO, FL 32808 ORLANDO, FL 32808 City-St-Zip: 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: TAMILYA WILLIAMS DIR 06/17/2009