

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90093 049 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000159059			
1. Entity Name: SEAWAY CORPORATION			
Principal Place of Business: 10312 WINDERMERE CHASE BLVD GOTH A, FL 34734		Mailing Address: 10312 WINDERMERE CHASE BLVD GOTH A, FL 34734	
2. Principal Place of Business - No P.O. Box # 2759 OLD WINTER GARDEN RD Suite, Apt. # etc.		3. Mailing Address: 2759 OLD WINTER GARDEN RD Suite, Apt. # etc.	
City & State: OCOEE FLORIDA Zip: 34761		City & State: OCOEE FLORIDA Zip: 34761	
4. FEI Number: 20-3889690		5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent: YI, KYUNG A 10312 WINDERMERE CHASE BLVD GOTH A, FL 34734 <i>Address change only</i>		7. Name and Address of New Registered Agent: Name: _____ Street Address (P.O. Box Number is Not Acceptable): 2759 OLD WINTER GARDEN RD City: OCOEE FL Zip Code: 34761	
8. 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. I am familiar with and accept the obligations of registered agent. SIGNATURE: X KYUNG A. YI X Kyung A. Yi 5/10/07 (Signature must be in ink or typed name of registered agent or both in the State of Florida. I am familiar with and accept the obligations of registered agent.)			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE: P. D. NAME: YI, KYUNG A. STREET ADDRESS: 10312 WINDERMERE CHASE BLVD CITY, ST, ZIP: GOTH A, FL 34734	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: 2759 OLD WINTER GARDEN RD CITY, ST, ZIP: OCOEE FL 34761	☒ Change ☐ Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	☐ Change ☐ Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	☐ Change ☐ Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	☐ Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the holder of a trust or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: X Kyung A. Yi X Kyung A. Yi 5/10/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		SIGNATURE: X Kyung A. Yi X Kyung A. Yi 5/10/07 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

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