

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013204

FILED  
Feb 18, 2009  
Secretary of State

Entity Name: SEABREEZE RESTAURANT USA CORPORATION

**Current Principal Place of Business:**

13118 US 301 S  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

114 E. BLOOMINGDALE AVENUE  
BRANDON, FL 335118101

**New Mailing Address:**

FEI Number: 20-4232052

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALKER, ROCHELLE L TREAS  
114 E. BLOOMINGDALE AVE  
BRANDON, FL 33511 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SCARECELLI, FREDERICK III  
Address: 114 E. BLOOMINGDALE AVENUE  
City-St-Zip: BRANDON, FL 335118101

Title: T ( ) Delete  
Name: WALKER, ROCHELLE  
Address: 114 E. BLOOMINGDALE AVE  
City-St-Zip: BRANDON, FL 33511 US

Title: S ( ) Delete  
Name: SCARCELLI, ALICIA M SEC  
Address: 114 E. BLOOMINGDALE AVE.  
City-St-Zip: BRANDON, FL 33511 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ROCHELLE WALKER

T

02/18/2009

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

\_\_\_\_\_  
Date