FILED Jun 21, 2007 8:00 am Secretary of State 05-17-2007 90033 025 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000080137 1. Entity Name WATERFRONT SALES AND MARKETING CORPORATION .							03 17 2		3 023	130.00	
Principal Plac 31790 US H PALM HARBO	WY 19 N SUI	ITE #190	Mailing Address 31790 US HWY 19 N SUITE #190 PALM HARBOR, FL 34684			66019541					
2. Principal P	lace of Busin	ness - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.		01182007	Chg-P	CR2E034	(12/06)			
City & State			City & State		4. FEI Numl	066159	•		plied For Applicable		
Zip	Country .		Zip				of Status Desired		3.75 Add Require	litional	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FL 32351					Street Address (P.O. Box Number is Not Acceptable) ALGUS TOWES ST. N.						
						City / Tip Code					
6 The obove	named antib	. authority this office and to	CLE	ARWATZ	ER.	FL	Zip Coo	262			
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. Fam familiar with, and accept the obligations of registered agent.											
SIGNATURE Square, sport or crimed rand of spots and late if applicable. (NOTE: Registered Agent signature required when rensistang) DATE											
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campeign Financing \$5.00 Mey Be Added to Fees											
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFFI	CERS AND DI	RECTORS	SIN 11	
TITLE NAME	P KING, ER	ic i	Delate TITLE						Change	Addition	
STREET ADDRESS		: HWY 19 N SUITE #19			E1 ADDRESS					Í	
CITY-ST-ZIP	PALM HA	RBOR, FL 34684	··	CITY	-ST-ZIP						
TITLE			Delete 1070					C	Change	Addition	
STREET ADDRESS					ET ADDRESS					-	
City-St-ZiF		 			-ST-ZIP			_			
NAME	}		C Delete	ITU	- I				Change	Addition	
STREET ACHORESS					E1 ADDRESS					;	
CITY-ST-AP			<u></u>	-ST-ZIP				100			
HITLE NAME		•	Detete	1/TLI NAM				L.] Change	☐ Addition	
STREET ADDRESS	<u> </u>				ET ACCORESS						
CHY-SI-ZIP	-		Delete	TITU	-ST-AP		-] Change	☐ Addition	
NAME	NA DELES IIII						•) Criange	LI ALONION	
STREET ADDRESS					ET ADDRESS -ST-ZIP						
CITY-ST-ZIP	 		Detete	-21-11F) Change	Addition		
NAME					i l			_			
STREET ADDRESS	1		-ST-ZIP					Ì			
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 receiver 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 chapter 607 or an attachment with an address, with appetitude providered.											
Chariged, or on an allaculment with an accordant interest with a contract with a con											
SIGNATURE: 4/29 /07 727-559-2840											