2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000004092

Entity Name: SEACOAST EMBROIDERY, INC.

FILED May 30, 2008 Secretary of State

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

5893 SOUTH CONGRESS AVE ATLANTIS, FL 33462

Current Mailing Address: New Mailing Address:

5893 SOUTH CONGRESS AVE ATLANTIS, FL 33462

FEI Number: 42-1721491 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:

NICHOLS, SCOTT MASON, DAWN M MRS 5851 LA GORCE CIRCLE 5850 BAY HILL CIRCLE LAKE WORTH, FL 33463 US LAKE WORTH, FL 33463 US

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: DAWN MASON 05/30/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

NICHOLS, SCOTT Name: Name: MASON, DAWN 5850 BAY HILL CIRCLE 5851 LA GORCE CIRLE Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: LAKE WORTH, FL 33463

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

MANZUR, SORAYA Name: Name: MASON, MARC 5850 BAY HILL CIRCLE 5851 LA GORCE CIRCLE Address: Address: LAKE WORTH, FL 33463 LAKE WORTH, FL 33463 City-St-Zip:

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

MASON, MARC Name: Name: 5851 LAGORCE CIR. Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip:

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

MASON, DAWN Name: Name: Address: 5851 LAGORCE CIR. Address: City-St-Zip: LAKE WORTH, FL 33463 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: MARC MASON **PRES** 05/30/2008