

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000084727

Entity Name: OCEAN SON, INC.

**FILED**  
**Aug 18, 2013**  
**Secretary of State**

## **Current Principal Place of Business:**

5525 CLIFTON ROAD  
JACKSONVILLE, FL 32211

## **New Principal Place of Business:**

4446-1A HENDRICKS AVE  
#367  
JACKSONVILLE, FL 32207

## **Current Mailing Address:**

5525 CLIFTON ROAD  
JACKSONVILLE, FL 32211

## **New Mailing Address:**

4446-1A HENDRICKS AVE  
#367  
JACKSONVILLE, FL 32207

FEI Number: 27-1144842

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEEK, DAVID H  
50 NORTH LAURA STREET STE 2600  
JACKSONVILLE, FL 32202 US

## **Name and Address of New Registered Agent:**

PEEK, DAVID H  
1301 RIVER PLACE BLVD  
STE 1500  
JACKSONVILLE, FL 32207 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: DAVID H. PEEK

08/18/2013

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: FILMONT, JAMES M  
Address: 4446-1A HENDRICKS AVE, #367  
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: JAMES M. FILMONT

D

08/18/2013

Electronic Signature of Signing Officer or Director

Date