
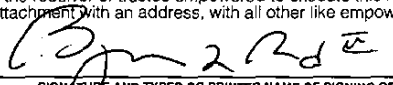


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91033 016 ***150.00

DOCUMENT # P26221					
1. Entity Name SEAFAR AMERICA, INC.					
Principal Place of Business 333 SOUTH HIGHLAND AVE. BRIARCLIFF MANOR, NY 10510 US			Mailing Address 333 SOUTH HIGHLAND AVE. BRIARCLIFF MANOR, NY 10510 US		
2. Principal Place of Business 111 CALUMET STREET Suite, Apt. #, etc.		3. Mailing Address 111 CALUMET STREET Suite, Apt. #, etc.			
City & State DEPEW, NY		City & State DEPEW, NY		4. FEI Number 13-5438420	
Zip 14043	Country USA	Zip 14043	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SCHAER, FRITZ 333 S HIGHLAND AVENUE BRIARCLIFF MANOR, NY 10510 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 111 CALUMET STREET DEPEW, NY 14043		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERZ, WERNER 333 S HIGHLAND AVENUE BRIARCLIFF MANOR, NY 10510 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 111 CALUMET STREET DEPEW, NY 14043		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WAIT, CHARLES 333 S HIGHLAND AVE. BRIARCLIFF MANOR, NY <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 111 CALUMET STREET DEPEW, NY 14043		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT ANTES, RICHARD 333 S. HIGHLAND AVE BRIARCLIFF MANOR, NY <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition EXECUTIVE VICE PRESIDENT BENJAMIN RAND 111 CALUMET STREET DEPEW, NY 14043		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP REED, JOHN 333 S HIGHLAND AVENUE BRIARCLIFF MANOR, NY 10510 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 MT. HOLLY BY-PASS LUMBERTON, NJ 08048		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition EXECUTIVE VICE PRESIDENT DAVID KOEBCKE 120 MT. HOLLY BY-PASS LUMBERTON, NJ 08048		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		BENJAMIN RAND EVP		4/21/04 716-601-3147	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	