## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 11, 2005 08:00 AM Secretary of State

Daytime Phone #

DOCUMENT # P93000015090  1. Entity Name SEA KAT INC.				<u> </u>	secretary of State	
Principal Place 9305 OLD O DAVIE, FL 3	RCHARD RD	Mailing Address 9305 OLD ORCHARD RD DAVIE, FL 33328				
	The second secon	Section 2012 Report Assessment	en de la companya de			
			٠	07012005	No Chg-P CR2E034 (10/03)	
DO NOT WRITE IN THIS SPAC				4. FEI Number Applied For 65-0460125 Not Applicable		
				5. Certificate of Status Desired  \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent						
DRISCOLL, GERALD 9305 OLD ORCHARD RD DAVIE, FL 33328			DO NOT WRITE IN THIS SPACE			
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, andcept the obligations of registered agent.  SIGNATURE						
FILE NOW!!! FEE IS \$150.00  Due by September 7, 2005  9. Election Campaign Finance Trust Fund Contribution.				.00 May Be ed to Fees	In accordance with s. 607,193(2)(b), F.S., the corporation did not receive the prior notice,	
10. TITLE	OFFICERS AND DIR	ECTORS			Martin and the second of the s	
NAME STREET ADDRESS CITY-ST-ZIP	DRISCOLL, GERALD 9305 OLD ORCHARD RD DAVIE, FL 33328					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DRISCOLL, WENDY 9305 OLD ORCHARD RD DAVIE, FL 33328				U00000371722 07/11/05-80002-011 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- <u></u>			
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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.						