2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000018843

Entity Name: PELICAN ON OCEAN, INC.

FILED Aug 05, 2009 Secretary of State

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

826 OCEAN DR MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

826 OCEAN DR MIAMI BEACH, FL 33139

FEI Number: 65-0466132 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:

MERLO, MICHELE KRITZMAN, ROBERT M ESQUIRE EPSTEIN BECKER & GREEN, P.C. 826 OCÉAN DRIVE MIAMI BCH, FL 33139 200 S. BISCAYNE BLVD., #4300 US MIAMI, FL 33131 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: ROBERT M. KRITZMAN 08/05/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

ROSSO, RENZO ROSSO, RENZO Name: Name: 220 WEST 19TH STREET, 11TH FLOOR Address:

220 WEST 19TH STREET, 11TH FLOOR Address: City-St-Zip: NEW YORK, NY 10011 City-St-Zip: NEW YORK, NY 10011

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

Name: MERLO, MICHELE Name: DURANTE, DANILO

826 OCEAN DR 220 WEST 19TH STREET, 11TH FLOOR Address: Address:

MIAMI BEACH, FL 33139 NEW YORK, NY 33139 City-St-Zip: City-St-Zip:

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

Name: AMERI, MAURIZIO 826 OCEAN DRIVE Address: Address: City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139

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: ROBERT M. KRITZMAN RA 08/05/2009