

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000054814

1. Entity Name
OCEAN ENERGY, INC.



Principal Place of Business
1520 SAN IGNACIO AVE.
2
CORAL GABLES, FL 33146 US

Mailing Address
1520 SAN IGNACIO AVE.
2
CORAL GABLES, FL 33146 US



01102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0445237	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DESPINA MARIA VELISSARIOU
10760 SW 102ND AVE
MIAMI, FL 33176

**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, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P VELISSARIOU, DESPINA 10760 SW 102ND AVE MIAMI, FL 33176
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LOWEN DE LUCA, FRANCA L 1520 SAN IGNACIO AVE, # 2 CORAL GABLES, FL 33146
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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01/18/07-80007-019 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Despina Velissariou **VELISSARIOU**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/2007 (305) 7400088

Date

Daytime Phone #