

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 08:00 A
Secretary of State

DOCUMENT # P93000085611

1. Entity Name
OCEAN ENTERPRISES, INC.



Principal Place of Business
**% DC HOLDINGS, INC.
PO BOX 6142
JENSEN BEACH, FL 34957-6142 US**

Mailing Address
**% DC HOLDINGS, INC.
PO BOX 6142
JENSEN BEACH, FL 34957-6142 US**



01092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0454121

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CARPENTER, A P
1456 NE OCEAN BLVD
10-202
STUART, FL 34996**

**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 renewing) 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
**DVS
DANIELS, JOHN A
835 WOODLAND DR.
GLENVIEW, IL 60025**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DPT
CARPENTIER, ANTHONY P
1456 NE OCEAN BLVD
STUART, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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NAME
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CITY - ST - ZIP

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IN THIS SPACE**

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04/20/07-80059-004 150.00

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. **A.P. CARPENTIER**

SIGNATURE: *A.P. Carpenter President*

4/7/07

772 486 0937

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #