

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90295 001 ***361.25

DOCUMENT # P97000048313 1. Entity Name OCEAN REEF MARINE SERVICES, INC.	
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Principal Place of Business 35 OCEAN REEF DRIVE STE. 200 KEY LARGO, FL 33037	Mailing Address 35 OCEAN REEF DRIVE STE. 200 KEY LARGO, FL 33037
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02052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0765492	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LUBAN, KENNETH A 35 OCEAN REEF DRIVE STE. 200 KEY LARGO, FL 33037
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

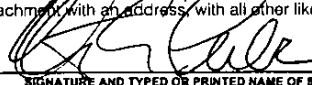
**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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	PD ASTBURY, PAUL M.G. 35 OCEAN REEF DRIVE, SUITE 200 KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT CARDER, SUZANNE C 35 OCEAN REEF DRIVE, SUITE 200 KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS LUBAN, KENNETH A 35 OCEAN REEF DRIVE, SUITE 200 KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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:  **Kenneth A. Luban** **2/5/2007** **305-367-5850**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #