


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # P97000054550 1. Entity Name EAST OCEAN GROUP INC. |  |
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| Principal Place of Business 23983 SE SUZANNE DR HOBE SOUND, FL 33455 | Mailing Address 8452 SE QUAIL RIDGE WAY HOBE SOUND, FL 33455 |
|--|--|

DO NOT WRITE IN THIS SPACE



05022006 No Chg-P CR2E034 (11/05)

| | |
|---|-------------------------------|
| 4. FEI Number 65-0787249 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

KENT, KATHY
8452 SE QUAIL RIDGE WAY
HOBE SOUND, FL 33455

**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.

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| FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P KENT, KATHY 116 SE 3RD ST DEERFIELD BCH, FL 33441 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | V BISTLINE, JIM 116 SE 3RD ST. DEERFIELD BEACH, FL 33441 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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05/19/06-80048-014 150.00

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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:  **3/29/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #