2004 FOR PROFIT CORPORATION

May 24, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P98900019893 1. Entity Name SEA STUFFE, INC. Mailing Address Principal Place of Business 342 WILLIAMS POINT BOULEVARD 342 WILLIAMS POINT BOULEVARD CGCOA, FL 32927 COCOA, FL 32927 05072004 CR2E034 (10/03) No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0846888 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DEAN, RICHARD T 342 WILLIAMS POINT BOULEVARD COCOA, FL 32927 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 Squarue, typed or printed name of registered agent and talle 8 applicable. DATE (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 OFFICERS AND DIRECTORS 10. TITLE DEAN, RICHARD T MARKE 342 WILLIAMS POINT BOULEVARD STREET ADDRESS U00000161334 05/24/04-80004-007 150.00 COCOA, FL 32927 CITY - ST- 709 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 3331.5 NAME

12. I hereby certify that the information supplied with the filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental period 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 tractice empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addition, with all other like empowered.

SIGNATURE:

STREET ADDRESS CETY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CATY-ST-ZIP

FILED