

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000021179

1. Entity Name
CENTURY OVERSEAS, INC.



Principal Place of Business
785 CRANDON BLVD
UNIT 706
KEY BISCAYNE, FL 33149

Mailing Address
785 CRANDON BLVD
UNIT 706
KEY BISCAYNE, FL 33149

FILED
2008 MAR -4 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02242008 No Chg-P CR2E034 (11/05)

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4. FEI Number
65-1012873

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATE ACCESS, INC.
236 E 6TH AVE.
TALLAHASSEE, FL 32301

**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, 2008 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
MAQUINAY, ROBERT
785 CRANDON BLVD #706
KEY BISCAYNE, FL 33149

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

300120098223
03/12/08--01026--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:

Robert Maquinay
Robert Maquinay

SIGNATURE AND TYPED OR PRINTED NAME OF SERVING OFFICER OR DIRECTOR

March 4/2008
Date Daytime Phone #