


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000084095	
1. Entity Name SEABREEZE HOLDINGS, INC.	

Principal Place of Business 2910 BAY TO BAY BLVD SUITE 200 TAMPA, FL 33629	Mailing Address 2910 BAY TO BAY BLVD SUITE 200 TAMPA, FL 33629
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01052006 No Chg-P CR2ED34 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3536245	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WHITING, PAUL L 1718 RICHARDSON PLACE TAMPA, FL 33606

**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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

000000433627
04/20/06-80014-002 150.00

10. OFFICERS AND DIRECTORS	
TITLE VP NAME WHITING, GAIL F STREET ADDRESS 1718 RICHARDSON PLACE CITY-ST-ZIP TAMPA, FL 33606	DO NOT WRITE IN THIS SPACE
TITLE CEO NAME WHITING, PAUL L STREET ADDRESS 1718 RICHARDSON PLACE CITY-ST-ZIP TAMPA, FL 33606	
TITLE VP NAME WHITING, PAUL JR STREET ADDRESS 3302 S. SAN MIGUEL CITY-ST-ZIP TAMPA, FL 33629	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: Paul L. Whiting
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-06 P13-314-0050
Date Daytime Phone #