

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040398

Entity Name: SEY BEACON, INC.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

953 HYACINTH DRIVE
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

953 HYACINTH DRIVE
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 65-0916775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINERLEY, KENNETH L ESQ.
BLOCH, MINERLEY & FEIN, P.L.
980 N. FEDERAL HIGHWAY, SUITE 412
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JACOVITZ, HAL
Address: 953 HYACINTH DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: JACOVITZ, PAULA
Address: 953 HYACINTH DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAL JACOVITZ

D

04/13/2006

Electronic Signature of Signing Officer or Director

Date