2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P99000085600

SOUTHSEA GOURMET, INC.

FILED Jan 09, 2006 08:00 AM Secretary of State

Principal Place of Business

11190 BISCAYNE BLVD. MIAMI, FL 33181

Mailing Address

3774 NE 167TH ST N. MIAMI BEACH, FL 33160



01042006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0951740 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

TORTOSA, SILVIA 3774 N.E. 167TH ST. MIAMI BEACH, FL 33160

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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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 reinstalling) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fin Trust Fund Contribution			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARPER, DAVID A 3774 NE 167TH ST. N. MIAMI BEACH, FL 33160				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TORTOSA, SILVIA 3774 N.E. 167TH ST. MIAMI, FL 33160				U00000379245 01/10/06-80015-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS GITY-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 of trustee ampowered 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 of the corporation of the cor					

ED NAME OF SIGNING DEFICER OR DIRECTOR