FILED Mar 30, 2004 08:00 Secretary of Stat

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S11851 1. Entity Name OCEANIC ENDEAVOURS INCORPORATED							
Principal Place of Business 140 SCENIC MAGNOLIA DR DELAND, FL 32724 US Mailing Address C/O ACCOUNTING & BUSINESS CON 1535 SE 17TH ST., B206 FORT LAUDERDALE, FL 33316			·				
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				02262004 4. FEI Numbe 65-022 5. Certificate			0/03) Applied For Not Applicable 5 Additional lequired
TAYLOR, FRANKLIN W., JR. 140 SCENIC MAGNOLIA DR DELAND, FL 32724			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. It am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registronid agent and little? applicable (NOTE Registered Agent signature required when reinstating) DATE.							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Yrust Fund Contribution.				.00 May Be led to Fees	U000000 03/30/04-8	99154 30001-020	150.00
10.	OFFICERS AND DIRE	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAYLOR, FRANKLIN W., JR. 140 SCENIC MAGNOLIA DR DELAND, FL 32724	<u>-</u>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TAYLOR, DEBORAH A.H. 140 SCENIC MAGNOLIA DR DELAND, FL 32724					•	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	DO	NOT W	RITE	-
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							.
THEE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section (19,07(3)(i), 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: July W. T. J. Frankin W. Thy or JR. 23 MAN 04 SIGNATURE AND TYPED OF PRINTED-NAME OF SIGNING OFFICER OR DIRECTOR Date Daylorge Phone of							