2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2004
Secretary of State

DOCUMENT# V40785

Entity Name: SEAWAY HOSPITALITY CORPORATION

Current Principal Place of Business:

1200 ANASTASIA AVE.
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

1200 ANASTASIA AVE.
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-3125982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUTLER, ROBERT E
1200 ANASTASIA AVENUE
CORAL GABLES, FL 33134 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: PD ( ) Delete
Name: PRESCOTT, T. GENE
Address: 1200 ANASTASIA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: STD ( ) Delete
Name: BUTLER, ROBERT E
Address: 1200 ANATASIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: AS ( ) Delete
Name: PELLETIER, JIM
Address: 1200 ANATASIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: ST. CLAIR, KEITH
Address: 1701 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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: JIM PELLETIER AS 03/09/2004

Electronic Signature of Signing Officer or Director — Date