2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V45687

Entity Name: SEA & AUTOMASTERS, INC.

FILED Jan 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4904 N TRAVELERS PALM 1831 NE 51ST ST.

TAMARAC, FL 33319 US W1

FT. LAUDERDALE, FL 33308 US

Current Mailing Address: New Mailing Address:

4904 N TRAVELERS PALM LN 1831 NE 51ST ST.

TAMARAC, FL 33319 US

FT. LAUDERDALE, FL 33308 US

FEI Number: 65-0348237 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FARINA, JOHN
4904 N TRAVELERS PALM LN
FARINA, JOHN
1831 NE 51ST ST.

TAMARAC, FL 33319 US W1 FT. LAUDERDALE, FL 33308 US

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: JOHN FARINA 01/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: FARINA, JOHN Name: FARINA, JOHN

 Address:
 4904 N TRAVELERS PALM LN
 Address:
 1831 NE 51ST ST., #W1

 City-St-Zip:
 TAMARAC, FL 33319
 City-St-Zip:
 FT. LAUDERDALE, FL 33308

Title: VPS () Delete Title: VPS (X) Change () Addition

Name: FARINA, JOY Name: FARINA, JOY

 Address:
 4904 NORTH TRAVELERS PALM LANE
 Address:
 1831 NE 51ST ST., #W1

 City-St-Zip:
 TAMARAC, FL 33319
 City-St-Zip:
 FT. LAUDERDALE, FL 33308

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: JOHN FARINA PD 01/24/2006