2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V66859

Entity Name: OCEAN TOWING CORP.

FILED Aug 26, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
400 BEACH RD	250 OCEAN ROAD
#155 VERO BEACH, FL 32963	1C VERO BEACH, FL 32963
Current Mailing Address:	New Mailing Address:
400 BEACH RD #155 VERO BEACH, FL 32963	250 OCEAN ROAD 1C VERO BEACH, FL 32963
FEI Number: 65-0365293 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:
LESHE, ROBERT J. 400 BEACH RD #155	LESHE, ROBERT J. 250 OCEAN ROAD 1C
VERO BEACH, FL 32963 US	VERO BEACH, FL 32963 US
The above named entity submits this statement for the pin the State of Florida.	urpose of changing its registered office or registered agent, or both,
SIGNATURE:	08/26/2008
Electronic Signature of Registered Age	nt Date
In accordance with s. 607.193(2)(b), F.S., the corporation did not Election Campaign Financing Trust Fund Contribution ().	t receive the prior notice.
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PT () Delete Name: LESHE, ROBERT J., Address: 250 OCEAN RD 1-C City-St-Zip: VERO BEACH, FL 32963	Title: () Change () Addition Name: Address: City-St-Zip:
Title: VP () Delete Name: LESHE. WILLIAM	Title: () Change () Addition Name:

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

VP,S

CARROLL, MIKE

435 B-1 FM 1092 #222 STAFFORD, TX 77477

(X) Change () Addition

() Change () Addition

 Address:
 435 B-1 FM 1092 #222

 City-St-Zip:
 STAFFORD, TX 77478

 Title:
 VP (X) Delete

 Name:
 CARROLL, MIKE, VP

LESHE, JOHN S

VP,S

1002 SW LIGHTHOUSE DR

() Delete

PALM CITY, FL 34990

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

 VP
 (X) Delete
 Title:

 CARROLL, MIKE VP
 Name:

 250 OCEAN RD 1-C
 Address:

 VERO BEACH, FL 32963
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT J. LESHE PT 08/26/2008