

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000010283

**Entity Name:** SEASCAPE ARTIFACT EXHIBITS, INC.

**Current Principal Place of Business:**

5215 W.LAURAL ST  
TAMPA, FL 33607

**Current Mailing Address:**

5215 W.LAURAL ST  
TAMPA, FL 33607 US

**FEI Number: 81-0745569**

**Certificate of Status Desired: No**

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

LEGALINC CORPORATE SERVICES INC.  
5237 SUMMERLIN COMMONS, STE 400  
FORT MYERS, FL 33907 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title CPST  
Name CARABINI, MICHAEL  
Address 4910 BIRCH ST  
City-State-Zip: NEWPORT BEACH CA 92660

Title D  
Name CRUM, ADAM  
Address 4910 BIRCH ST  
City-State-Zip: NEWPORT BEACH CA 92660

Title D  
Name BORCHARD, THOMAS  
Address 25909 PALA SUITE 300  
City-State-Zip: MISSION VIEJO CA 92691

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: THOMAS BORCHARD**

**DIRECTOR**

**03/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date