

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 19, 2006 8:00 am**  
**Secretary of State**

04-19-2006 90088 003 \*\*\*158.75

**DOCUMENT # F01000004863**

1. Entity Name  
**OCEAN WORKS INTERNATIONAL, INC.**



Principal Place of Business: **1646 WEST SAM HOUSTON PARKWAY NORTH HOUSTON, TX 77043**  
 Mailing Address: **1646 WEST SAM HOUSTON PARKWAY NORTH HOUSTON, TX 77043**

40053576



04162006 Chg-P CR2E034 (11/05)

2. Principal Place of Business: Suite, Apt. #, etc., City & State, Zip, Country  
 3. Mailing Address: Suite, Apt. #, etc., City & State, Zip, Country

4. FEI Number: **76-0623338**  
 Applied For:  Not Applicable

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**ADAMSON, JAMES E**  
**8000 SOUTH FLAGLER DRIVE**  
**WEST PALM BEACH, FL 33405**

7. Name and Address of New Registered Agent  
 Name: \_\_\_\_\_  
 Street Address (P. O. Box Number is Not Acceptable): \_\_\_\_\_  
 City: \_\_\_\_\_ **FL** Zip Code: \_\_\_\_\_

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00**  
 9. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PDS NAME: JACOBSON, JOHN R STREET ADDRESS: 1646 WEST SAM HOUSTON PARKWAY NORTH CITY-ST-ZIP: HOUSTON, TX 77043	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: V NAME: ADAMSON, JAMES E STREET ADDRESS: 8000 SOUTH FLAGLER DR CITY-ST-ZIP: WEST PALM BEACH, FL 33405	<input type="checkbox"/> Delete	TITLE: D NAME: Stanley, Rodney W. STREET ADDRESS: 11118 Sherwood Forest Glen CITY-ST-ZIP: Houston, TX 77043	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: LITTLE, MICHAEL E STREET ADDRESS: 640 ELIZABETH RD CITY-ST-ZIP: SAN ANTONIO, TX 78209	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: TIDWELL, JAMES M STREET ADDRESS: 142 PLANTATION CITY-ST-ZIP: HOUSTON, TX 77024	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: DEMARS, BRUCE STREET ADDRESS: 2303 WINDSOR ROAD CITY-ST-ZIP: ALEXANDRIA, VA 22307	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: John R. Jacobson **John R. Jacobson, PDS/D** 4/17/06 713-933-8000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #