

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000005460

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: H2OCEAN,INC.

**Current Principal Place of Business:**

3533 HIGH RIDGE ROAD  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

7938 SW JACK JAMES DRIVE  
STUART, FL 34997

**Current Mailing Address:**

6151 SHADOW TREE LANE  
LAKE WORTH, FL 33463

**New Mailing Address:**

7938 SW JACK JAMES DRIVE  
STUART, FL 34997

FEI Number: 01-0605608

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOLOS, EDWARD  
6151 SHADOW TREE LANE  
LAKE WORTH, FL 33463 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: VP ( ) Delete  
Name: STERN, LARRY  
Address: 6151 SHADOW TREE LANE  
City-St-Zip: LAKE WORTH, FL 33463

Title: ST ( ) Delete  
Name: KOLOS, GERI ANN  
Address: 6151 SHADOW TREE LANE  
City-St-Zip: LAKE WORTH, FL 33463

Title: PRES ( ) Delete  
Name: KOLOS, EDWARD  
Address: 6151 SHADOW TREE LANE  
City-St-Zip: LAKE WORTH, FL 33463 US

**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:

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: GERI KOLOS

SEC

04/28/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date