

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000127687

FILED
Apr 27, 2005
Secretary of State

Entity Name: OXYGEN INTERACTIVE MEDIA, INC.

Current Principal Place of Business:

14050 BISCAYNE BLVD
415
MIAMI, FL 33181

New Principal Place of Business:

671 NE 195TH ST
207E
NORTH MIAMI BEACH, FL 33179

Current Mailing Address:

14050 BISCAYNE BLVD
415
MIAMI, FL 33181

New Mailing Address:

671 NE 195TH ST
207E
NORTH MIAMI BEACH, FL 33179

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PSTD () Delete
Name: PLAZA, NICHOLAS A
Address: 5701 BISCAYNE BLVD STE 302
City-St-Zip: MIAMI, FL 33137

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: PLAZA, NICHOLAS A
Address: 671 NE 195TH ST #207E
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VP () Change (X) Addition
Name: ROGER, CASANOVA
Address: 671 NE 195TH ST #207E
City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NICHOLAS A PLAZA

PTSD

04/27/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date