

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157197

Entity Name: OEVAU TECHNOLOGIES, INC.

FILED  
Apr 05, 2005  
Secretary of State

**Current Principal Place of Business:**

THE TAYLOR BUILDING  
320 N. MAGNOLIA AVE., STE. A5  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

THE TAYLOR BUILDING  
320 N. MAGNOLIA AVE., STE. A5  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 20-0521323      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KAUFFMAN, JAY E  
6526 CENTRAL AVENUE  
ST PETERSBURG, FL 33707      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: PD ( ) Delete  
Name: GORMAN, RICHARD  
Address: 1551 EAGLE NEST CR.  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VPD ( ) Delete  
Name: GUEST, ROBERT  
Address: 460 S. TRIPLET LAKE DR.  
City-St-Zip: CASSELBERRY, FL 32707

Title: DOO ( ) Delete  
Name: PUCHALA, CHRISTOPHER  
Address: 7550 SE 114TH LANE  
City-St-Zip: BELLEVIEW, FL 34420

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SANTORE, FRANK  
Address: 320 N MAGNOLIA AVENUE, SUITE A5  
City-St-Zip: ORLANDO, FL 32801

Title: PD (X) Change ( ) Addition  
Name: GUEST, ROBERT  
Address: 320 N MAGNOLIA AVE, SUITE A5  
City-St-Zip: ORLANDO, FL 32801

Title: D (X) Change ( ) Addition  
Name: SOBCZYK, TIM  
Address: 320 N MAGNOLIA AVE, SUITE A5  
City-St-Zip: ORLANDO, FL 32801

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: ROBERT GUEST

P

04/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date