

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 18, 2005 8:00 am**  
**Secretary of State**

02-18-2005 90050 038 \*\*\*150.00

<b>DOCUMENT # F04000001263</b> 1. Entity Name <b>OCEAN POTION INTERNATIONAL SALES AND MARKETING, LTD. A VIRGINIA CORPORATION</b>					
Principal Place of Business <b>801 BRICKELL BAY DRIVE, TOWER 4/UNIT 1065 MIAMI, FL 33131</b>			Mailing Address <b>801 BRICKELL BAY DRIVE, TOWER 4/UNIT 1065 MIAMI, FL 33131</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip      Country			City & State Zip      Country		
4. FEI Number <b>54-1719171</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>				7. Name and Address of New Registered Agent Name <b>NRAI Services, Inc.</b> Street Address (P.O. Box Number is Not Acceptable) <b>526 E. Park Avenue</b> City <b>Tallahassee</b> <b>FL</b> Zip Code <b>32301</b>	
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 <b>Jackie Sirman, Asst. Sec.</b> <b>2/7/2005</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSTD GARCIA, EDWARD S JR 2209 COMMERCE PARKWAY VIRGINIA BEACH, VA 23454</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P/Assist S/Assist. T/D Edward S. Garcia, Jr. 2209 Commerce Parkway Virginia Beach, VA 23454</b>
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V/Assist S/Assist. T/D Carmen F. Garcia 2110 Verona Quay Virginia Beach, VA 23456</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSTD JONES, IRVIN C JR 668 SHERWOOD FOREST LANE ARRINGTON, VA 22922</b>	<input checked="" type="checkbox"/> Delete	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V/S/T/D Edward S. Garcia, Sr. 3333 Virginia Beach Blvd., Suite 24 Virginia Beach, VA 23452</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Assist Sec/Assist. Treasurer Andrea M. Kilmer 3333 Virginia Beach Blvd., Suite 24 Virginia Beach, VA 23452</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	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 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 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.					
<b>SIGNATURE:</b>			<b>2/1/05</b> (757)486-1110		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>Edward S. Garcia, Jr., President</b>					

**50017213**



01262005      Chg-P      CR2E034 (10/03)