2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002694

Entity Name: OBJECTS ONLINE, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

632 W JEFFERSON ST 26 S BROOKSVILLE AVE BROOKSVILLE, FL 34601 UPSTAIRS

BROOKSVILLE, FL 34601

Current Mailing Address: New Mailing Address:

P.O. BOX 18907 P.O. BOX 919 TAMPA, FL 33679 PARRISH, FL 34219

FEI Number: 94-3358695 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BIASINI, KATHLEEN M CPA
4314 S. GRADY AVE.
TAMPA, FL 33611 US
BIASINI, KATHLEEN M CPA
13150 STATE ROAD 62
PARRISH, FL 34219 US

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: 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: BUTTY, PHILIPPE Name: BUTTY, PHILIPPE

 Address:
 PO BOX 18907
 Address:
 PO BOX 919

 City-St-Zip:
 TAMPA, FL 33679
 City-St-Zip:
 PARRISH, FL 34219

Title: DVP () Delete Title: DVP (X) Change () Addition

 Name:
 SOULE, XAVIER
 Name:
 SOULE, XAVIER

 Address:
 PO BOX 18907
 Address:
 PO BOX 919

 City-St-Zip:
 TAMPA, FL 33679
 City-St-Zip:
 PARRISH, FL 34219

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MERCHER, ERIC
 Name:
 MERCHER, ERIC

 Address:
 PO BOX 18907
 Address:
 PO BOX 919

 City-St-Zip:
 TAMPA, FL 33679
 City-St-Zip:
 PARRISH, FL 34219

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: PHILIPPE BUTTY DP 04/29/2008