2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 29, 2007 08:00 AM Secretary of State

Fee Required

DOC	JMEN	T#J	11	5	1()5
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1. Entity Name O'NEILL ENTERPRISES, INC.



Principal Place of Business

C/O CYNTHIA C. O""NEILL

2608 ASTON CIR MELBOURNE, FL 32940 US Mailing Address

C/O CYNTHIA C. O""NEILL P.O BOX 1056

MELBOURNE, FL 32902 US



DO NOT WRITE IN THIS SPACE

01252007	No Chg-P	CR2E034 (11/05)		
4. FEI Number		_	Applied For	
59-2719660			Not Applicable	
5. Certificate of Status Desired			\$8.75 Additional	

6. Name and Address of Current Registered Agent

O'NEILL, CYNTHIA C. 2608 ASTON CIR. MELBOURNE, FL 32940

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The above named entity submits this statement for the p the obligations of registered agent.	surpose of changing its registered office or regist	ered agent, or both, in the State	of Florida) am familiar with, and accep
SIGNATURE Signature typed or printed name of registered agent and title	† applicable (NOTE Registered Agent signature requi	red when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		5.00 May Be U1/30.	0000605778 707-80050-018 150.00

	OCTION AND DIDECTORS
10.	OFFICERS AND DIRECTORS
TITLE	DP
NAME	O'NEILL, CYNTHIA C.
STREET ADDRESS	2608 ASTON CIR.
CHY-SI-VP	MELBOURNE, FL 32940
TITLE	S
NAME	O'NEILL, STEPHEN M.
STREET ADDRESS	2608 ASTON CIR.
City-S1-ZiP	MELBOURNE, FL 32940
TITLE	
MAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY+ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
12. Thereby	certify that the information supplied with this filling does not qualify for the ex-

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ualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information of that my signature snall have the same legal effect as if made under oath; that I am an officer or director is report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supple