2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2006
Secretary of State

DOCUMENT# P00000101486

Entity Name: OPA, INC.

Current Principal Place of Business:

5970 S.W. 18TH STREET
#122
BOCA RATON, FL 33433 US

New Principal Place of Business:

22878 EL DORADO DRIVE
BOCA RATON, FL 33433 US

Current Mailing Address:

5970 S.W. 18TH STREET
#122
BOCA RATON, FL 33433 US

New Mailing Address:

22878 EL DORADO DRIVE
BOCA RATON, FL 33433 US

FEI Number: 65-1065751 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOFFMAN, CARL S
5970 S.W. 18TH STREET
#122
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

HOFFMAN, CARL S
22878 EL DORADO DRIVE
#122
BOCA RATON, FL 33433 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: 01/04/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HOFFMAN, CARL S
Address: 5970 S.W. 18TH STREET, SUITE 122
City-St-Zip: BOCA RATON, FL 33433

Title: VP ( ) Delete
Name: HOFFMAN, PAULA R
Address: 22878 EL DORADO DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: S ( ) Delete
Name: NORTON, ELISSA
Address: 3357 HERTFORDSHIRE RD
City-St-Zip: FURLONG, PA 18925

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL S. HOFFMAN DR 01/04/2006
Electronic Signature of Signing Officer or Director — Date