2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115542

TUCUMEN 540 RIO 9J

BUENOS AIRES, ARGENTINA,

Address: City-St-Zip:

Entity Name: OCEANIKA FOOD INTERNATIONAL, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3440 HOLLYWOOD BLVD 18851 NE 29TH AVE SUITE 360 SUITE 900 HOLLYWOOD, FL 33021 AVENTURA, FL 33180 **Current Mailing Address: New Mailing Address:** 3440 HOLLYWOOD BLVD 18851 NE 29TH AVE SUITE 360 SUITE 900 HOLLYWOOD, FL 33021 AVENTURA, FL 33180 FEI Number: 65-1069824 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: ROTH, ESQ, LEONARD A ROTH,, LEONARDO A ESQ 3440 HOLLYWOOD BLVD 18851 NE 29TH AVENUE SUITE 360 SUITE 900 HOLLYWOOD, FL 33021 US AVENTURA, FL 33180 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: LEONARDO A ROTH 04/29/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DVPT () Delete Title: () Change () Addition GERPE, JOSE MARIA Name: Name: TUCUMAN 540 PLSO 9, OF J Address: Address: City-St-Zip: BUENOS AIRES, ARGENTINA, City-St-Zip: Title: () Delete Title: () Change () Addition GERPE, JOSE MARIA Name: Name: TUCUMAN 540 PLSO 9, OF J Address: Address: BUENOS AIRES, ARGENTINA, City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition GERPE, TOMAS MARTIN Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JOSE MARIA GERPE DVPT 04/29/2005