2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000030268

Entity Name: MYOP PROPERTIES INC.

FILED Feb 02, 2005 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
| | |

LAYNE DALFEN
2785 HILL PARK CIR

MONTREAL, h3h 1s8 C

Current Mailing Address: New Mailing Address:

6401 CONGRESS AVE STE 140 BOCA RATON, FL 33487

2785 HILL PARK CIRCLE MONTREAL, CANADA, PQ H3H 1S8

FEI Number: 52-2311310 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:

LIPPMAN, KAREN 6401 CONGRESS AVE STE 940 BOCA RATON FL 3348

BOCA RATON, FL 33487 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:

Electronic Signature of Registered Agent Date

LAYNE DALFEN

2785 HILL PARK CIRCLE

MONTREAL, CANADA, PQ H3H 1S8

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete

Name: DALFEN, LAYNE Address: 2785 HILL PARK CIRCLE

City-St-Zip: MONTREAL, QUEBEC H3H 1S8,

 Name:
 DELFEN, CELIA

 Address:
 6800 MACDONALD AVENUE PH #16

 City-St-Zip:
 MONTREAL, QUEBEC CANADA, H3X 3Z2

Title: D (X) Change () Addition

Name: DALFEN, LAYNE

Address: 2785 HILL PARK CIRCLE

City-St-Zip: MONTREAL, CANADA, PQ H3H 1S8

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 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.

SIGNATURE: LAYNE DALFEN D 02/02/2005